SEC Foi				****									1001011					
	FORM	4	UNITED STATES SECURITIES AND EXCHANGE CON Washington, D.C. 20549												OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).						to Sectio	n 16(a) of the S	Securi	NEFICI ties Exchar mpany Act		SHIP	OMB N Estima hours	ated av	erage burdeı	3235-0287 1 0.5		
1. Name and Address of Reporting Person [*] DINH VIET D						2. Issuer Name and Ticker or Trading Symbol <u>Fox Corp</u> [FOX]								of Reporting cable) or [.] (give title	g Pers	uer vner specify		
(Last)(First)(Middle)C/O FOX CORPORATION1211 AVENUE OF THE AMERICAS						3. Date of Earliest Transaction (Month/Day/Year) 04/07/2021								X below) below) Chief Legal and Policy Officer				
(Street) NEW YORK NY 10036						4. If Amendment, Date of Original Filed (Month/Day/Year)							i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5		(Zip) le I - Non-Der	ivative	e Se	curitie	s Ac	quired	, Dis	posed c	of, or Be	neficia	lly Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)					ction 2A. Deemed Execution Date			Code (Instr		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d 5. Amou Securiti Benefic Owned	int of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Ownership	
								Code	v	Amount	Amount (A) or (D)		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
		٦	able II - Deriv (e.g.,							osed of converti			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)				6. Date Exercisable an Expiration Date (Month/Day/Year)		е	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e Ownersl 5 Form: Ily Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Restricted Stock Units	(1)	04/07/2021		A		428 ⁽²⁾		(3)		(3)	Class A Common Stock	428	\$0.00	69,945 ⁽⁴	4)	D		
Restricted Stock Units	(1)	04/07/2021		A		385 ⁽²⁾		(5)	(5) (5)		Class A Common Stock	385	\$0.00	62,918 ⁽⁴	4)	D		
Restricted Stock Units	(1)	04/07/2021		A		149 ⁽²⁾		(6)	(6) (6)		Class A Common Stock	149	\$0.00	24,424 ⁽⁴	4)	D		
Restricted Stock Units	(1)	04/07/2021		A		540 ⁽²⁾		(7)		(7)	Class A Common Stock	540	\$0.00	88,186 ⁽⁴	4)	D		

Explanation of Responses:

1. Each restricted stock unit represents the equivalent of one share of Fox Corporation's Class A Common Stock.

2. Represents dividend equivalents accrued with respect to restricted stock units.

3. The restricted stock units vested 20% on September 30, 2019, 40% on June 30, 2020 and the remaining 40% will vest on June 30, 2021.

4. Represents the aggregate number of restricted stock units held by the Reporting Person, including dividend equivalents accrued that vest on the same terms as the respective underlying restricted stock units.

5. The restricted stock units vested 50% on June 15, 2020 and the remaining 50% will vest on June 15, 2021.

6. The restricted stock units vested one-third on August 15, 2020, and will vest one-third on each of August 15, 2021 and August 15, 2022.

7. The restricted stock units will vest one-third on each of August 15, 2021, August 15, 2022 and August 15, 2023.

Remarks:

<u>/s/ Laura A. Cleveland as</u> <u>Attorney-in-Fact for Viet D.</u>

Dinh

04/09/2021

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.