FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	D.C.	20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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					or	Sectio	n 30(h) d	of the	Investme	nt Co	mpany Act	of 194	10							
1. Name ar		Reporting Person*					Name ar O <u>rp</u> [F		ker or Tra	ding	Symbol			(Ch	elationship of the control of the co	cable)	g Pers	son(s) to Issi		
(Last)	(F	irst)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/26/2024									(give title		Other (s below)					
C/O FOX CORPORATION 1211 AVENUE OF THE AMERICAS				4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) NEW YORK NY 10036													X Form filed by One Reporting Person Form filed by More than One Reporting Person							
	JKK IV	1					Rule 10b5-1(c) Transaction Indication													
(City)	(S	tate)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										d to					
		Tab	le I - Nor	-Deriv	ative	Sec	urities	s Ac	quired	Dis	posed o	of, or	Bene	ficial	y Owned	I				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				2A. Deemed Execution Date if any (Month/Day/Yea			Code (Instr. 5)			(A) or 3, 4 and		es Form ially (D) of Following (I) (II		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. B) Se Ad (A Di of (Ir Ir I		5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)	tive ties ed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	is Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration	Title	O N	umber						

Explanation of Responses:

- 1. Each deferred stock unit represents the equivalent of one share of Fox Corporation's Class A Common Stock.
- 2. Represents dividend equivalents accrued with respect to deferred stock units.

03/26/2024

3. The deferred stock units representing dividend equivalents become payable in stock upon the pay out of the underlying deferred stock units. The reported deferred stock units become payable on the earlier of (i) the first trading day of the quarter five years following the grant and (ii) the Reporting Person's end of service as a Director.

(3)

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

269(2)

Remarks:

Deferred

Stock Units

/s/ Laura A. Cleveland as Attorney-in-Fact for Paul D. 03/27/2024 <u>Ryan</u>

** Signature of Reporting Person Date

Class A

Commor Stock

(3)

269

\$30.58

32,212⁽⁴⁾

D

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.