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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number:		3235-028									

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol Fox Corp [FOX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
<u>CAREY CHASE</u>													X	Directo	or		10% O	wner			
(Last)	(Fi	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/03/2019										(give title		Other (sbelow)	specify		
1211 AVENUE OF THE AMERICAS						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) NEW YO	ORK N	Υ :	10036											X	Form f	Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Si	tate) ((Zip)																		
		Tab	le I - Non-			Sec	curitie	s Ac	quired,	Dis	posed c	of, or Be	nefic	ially	Owned	ı					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			ecution Date, any		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		ed (A) o	r and	Securitie Benefici	5. Amount of Securities Beneficially Dwned Following			7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) o (D)	Pric	Tran		ction(s) 3 and 4)			(11301.4)			
	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisal Expiration Date (Month/Day/Year		Amount of		f s g e Securi	D S (I	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Ow For Dire or I (I) (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amou or Numb of Share	er							
Deferred Stock Units	(1)	06/03/2019			A		21 ⁽²⁾		(3)		(3)	Class A Common Stock	21		\$34.24	3,285 ⁽⁴	.)	D			

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 granted on March 19, 2019.
- 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.
- 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.

Remarks:

/s/ Laura A. Cleveland as Attorney-in-Fact for Chase **Carey**

06/05/2019

** 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.