FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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hours per response	: 0.5								

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

								(, 0.				company Act										
1. Name and Address of Reporting Person* REDSTONE SHARI					2. Issuer Name and Ticker or Trading Symbol Paramount Global [PARAA,PARA]										5. Relationship of Reporti (Check all applicable)			ng Pe	erson(s) to			
(Last)	(Fi	rst) (I	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/16/2023										Officer (give title below)		Other (below)	specify		
1515 BROADWAY					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									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					
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication																
	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.															tended to						
		Table	I - I	Non-Deriva	tive S	Sec	urit	ies	Acc	uire	ed, Di	isposed o	f, or I	3enefic	ially	Owr	ned					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				2A. Deemed Execution Date, if any (Month/Day/Year			3. Transaction Code (Instr. 8)			4. Securities Disposed Of		and 5) Secu Bend Own Follo		icially d ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Co	ode	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)						
Class B common stock 05/1					3					P		165,000(1)	A	\$15.06	64 ⁽¹⁾ 57'		7,064 ⁽²⁾		D			
Class B common stock															10,525			I	By GRAT			
Class B common stock														11,		1,923		I	By GRAT 3			
		Tab	ole	II - Derivativ (e.g., pu								posed of, , convertil				Owne	d	,	· · ·	*		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Ex if a	a. Deemed decution Date, any ionth/Day/Year)	4. Trans Code 8)	(Inst				Expi (Mor	iration nth/Day	y/Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. The price reported is a weighted average price. The shares were purchased in multiple transactions at prices ranging from \$14.995 to \$15.100, inclusive. The Reporting Person undertakes to provide to the staff of the Securities and Exchange Commission, the Issuer or a stockholder of the Issuer, upon request, full information regarding the number of shares purchased at each separate price.
- 2. Includes shares acquired periodically pursuant to a dividend reinvestment program meeting the requirements of Rule 16a-11.

/s/ Christa A. D'Alimonte, Attorney-in-Fact for Shari

05/17/2023

Redstone

** 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.