## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

**OWNERSHIP** 

Washington,	D.C. 20549

Washington, D.S. 20040					
ANNUAL STATEMENT OF CHANGES IN BENEFICIAL	OMB Nu				

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average burden										
hours per respons	e: 1.0									

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Form 3	Holdings Repo	rteu.															
Form 4	Transactions R	eported.	File	ed pursuant to or Section					ities Excha ompany Ad								
1. Name and Address of Reporting Person*  ROYSTER SCOTT R  (Last) (First) (Middle)  5900 PRINCESS GARDEN PARKWAY				2. Issuer Name and Ticker or Trading Symbol RADIO ONE INC [ ROIA/ROIAK ]  3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006							Relationship of Reporting P neck all applicable) Director X Officer (give title below) Chief Financi			10% Owner Other (specify below)			
7TH FLOOR  (Street)  LANHAM MD 20706				4. If Amen	dment	, Date o	of Orig	inal File	d (Month/I	Day/Yea		6. Indiv _ine) X	Form	n filed by O	ne Re	porting Pe	
(City)	(Sta		Zip)					-1 D:		-6	D6			1			
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed 3. Execution Date, Transa		ransaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)  Amount (A) or Price			5. Amor Securiti Benefic Owned Issuer's		unt of 6. dies O'cially For at end of s Fiscal In		ership n: Direct or	7. Nature of ndirect Beneficial Ownership Instr. 4)		
Class D Common Stock			08/14/2006		G		7	2,800		D	\$0.00	_	424,079			D	
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)				rities Acquired f, warrants, opti  5. Number of Expire Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  Date				7. Tit Amor Secu Unde Deriv Secu and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of		vned	9. Number of		10. Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Remarks:

Linda J. Vilardo Attorney-In-

**Fact** 

\*\* Signature of Reporting Person

02/13/2007 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.