FORM 4

Check this box if no

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person* HUGHES CATHERINE L (Last) (First) (Middle) 1010 WAYNE AVENUE 14TH FLOOR (Street) SILVER SPRING MD 20910					2. Issuer Name and Ticker of Trading Symbol URBAN ONE, INC. [UONE/UONEK] 3. Date of Earliest Transaction (Month/Day/Year) 08/15/2018 4. If Amendment, Date of Original Filed (Month/Day/Year) 06/01/2018									Relationship of Reporting Person(s) to Issuer Check all applicable) X Director X 10% Owner X Officer (give title Other (specify below) Chairperson and Secretary Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person Person					
(City)	(S	·	(Zip)																
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D					2A. Deemed Execution Date,			3. Trans	3. Transaction Code (Instr.			ities Acquired (A) or d Of (D) (Instr. 3, 4 and 5)			nt of s .lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class C Common Stock ⁽¹⁾ 06/01					/2010			Code	V	Amount 600,0	(0) or) <u>A</u>	Price \$1.41	Transacti (Instr. 3 a	and 4)		D		
Class C Common Stock 06/01/ Class D Common Stock 06/01/							F ⁽²⁾	\vdash	508,2		D	\$2	8,166,830 7,658,587		D				
Class D Common Stock 06/01/					/2018		J (3)		91,757		D	\$2	7,566,830(4)		D				
			Table II - I	Derivativ e.g., put										Owned					
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Code	Transaction Code (Instr.		umber of vative urities uired (A) visposed D) (Instr. and 5)	Expiration	. Date Exercisable a Expiration Date Month/Day/Year)		7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	O N	mount r lumber f Shares		(Instr. 4)				
Option	\$1.41	06/01/2018		М			600,000	06/05/20	08 0	6/05/2018	Class I Commo	on 6	000,000	\$0.00	0		D		

Explanation of Responses:

- 1. This Form 4/A is being filed to add the line reporting the acquisition of 600,000 shares of Class D Common Stock upon the exercise of the reported stock option prior to disposition of the shares to the issuer in two previously reported transactions.
- 2. Represents shares tendered to the issuer in payment of stock option exercise price and to satisfy withholding obligations.
- 3. Represents a disposition of the shares to the issuer in exchange for cash at the fair market value of \$2.00 per share on the date of repurchase by the issuer.
- 4. The total represents all shares held by the reporting person across all classes of Urban One Inc. stock, Classes A, B, C and D. The reporting person beneficially owns a total of 7,566,830 shares of Urban One, Inc. to the tolking testing and a state state of the person and a state of the state of ownership is included in our most recent proxy filed April 30, 2018.

Remarks:

Karen Wishart, Attorney-In-

08/15/2018

Fact

** 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.