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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | D |
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| 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(h) of the Investment Company Act of 1940

| | ROVAL |
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| | hours per response: | 0.5 |
| l | Estimated average burden | |

| 1. Nume and Address of Reporting reison | | | 2. Issuer Name and Ticker or Trading Symbol Activision Blizzard, Inc. [ATVI] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|---|---------|---------|--|-----------------------|--|-----------------------|--|--|--|--|
| (Last) (First) (Middle) C/O ACTIVISION BLIZZARD, INC. 3100 OCEAN PARK BOULEVARD | | D, INC. | 3. Date of Earliest Transaction (Month/Day/Year) 06/25/2019 | _ | Officer (give title below) | Other (specify below) | | | | |
| (Street) SANTA MONICA | СА | 90405 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indi Line) X | vidual or Joint/Group Fil Form filed by One Re Form filed by More th Person | eporting Person | | | | |
| (City) | (State) | (Zip) | | | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities / Disposed Of (5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|--|---|-----------------------------|--|--|---------------|-------------------|---|---|---|
| | | | Code | | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | |
| Common Stock, par value \$0.000001 per share | 06/25/2019 | | Α | | 5,411 ⁽¹⁾ | A | \$ <mark>0</mark> | 116,249 ⁽²⁾ | D | |

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. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerc Expiration Da (Month/Day/Y | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|---|---|--|---|------------------------------|---|---|-----|--|---|-------|---|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. This grant was for 5,411 restricted stock units, each representing the right to receive one share of the Company's common stock, which will vest in equal installments on September 25, 2019, December 25, 2019, March 25, 2020, and June 25, 2020.

2. Following the transaction reported on this Form 4, Mr. Corti held (a) 110,019 shares of the Company's common stock and (b) 6,230 restricted stock units, each representing the right to receive one share of the Company's common stock.

Remarks:

<u>/s/ Robert J. Corti</u>

<u>06/26/2019</u>

** 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.