FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D | .C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | |
| 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).

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

| Name and Address of Reporting Person* Johnston Hugh F | | | 2. Issuer Name and Ticker or Trading Symbol MICROSOFT CORP [MSFT] | | | | | | | | | 5. Relations (Check all a X Dire | | licable) tor | ng Pers | 10% Ov | to Issuer 6 Owner | | |
|--|--|--|---|--|---|---|-------|-----------------------------|--|--------|--------------------|--|---|-----------------------|---|---|---------------------------------|--|---------------------------------------|
| (Last) | (Fi | rst) (M | ∕liddle) | | 3. Date of Earliest Transaction (Month/Day/Year) 06/04/2020 | | | | | | | | Office below | cer (give title w) | | Other (s below) | specify | | |
| ONE MICROSOFT WAY | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | \neg | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | ND W | A 9 | 8052-639 | 99 | | | | | | | | | | X | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution D | | | Date, | Transaction Code (Instr. | | | | | , 4 and Securi Benefi | | ies cially Following | Form: | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pr | ico Trans | | action(s) 3 and 4) | | | (Instr. 4) |
| Common Stock 06/04/2 | | | | /2020 | | | | A | | 273(1) | A | | \$ <mark>0</mark> | 4,800 | | | D | | |
| Common Stock | | | | | | | | | | | | 68(2) | | | I | By trust | | | |
| | 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) | Execution if any | A. Deemed 4. Trace any Cc Month/Day/Year) 8) | | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | De Sei (In: | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4) | y [| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amour or Number of Shares | er | | | | | |

Explanation of Responses:

- 1. Represents stock award which is fully vested on the date of grant.
- 2. The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Remarks:

Ann Habernigg, Attorney-infact for Hugh F. Johnston

** Signature of Reporting Person

06/08/2020

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.