FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPROVAL								
	OMB Number:	3235-0287							
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	Check this box if no longer subject to								
٦	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

							()				1 7											
	d Address of		2. Issuer Name and Ticker or Trading Symbol MICROSOFT CORP MSFT									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
<u>Capossela Christopher C</u>						THOROGOTT CORT [WISH]										Direc	rector		10% O	wner		
						2. Data of Farliant Transaction (Marth (Day (Mar)									X Office belo		er (give title w)		Other (specify below)			
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 12/14/2016									EV	P, Chief M	arketing	Offic	er		
C/O MICROSOFT CORPORATION							12/14/2010										r, cinci iii	anneang	Ome	CI.		
ONE MICROSOFT WAY																						
ONE WICKOSOFT WAT						4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
					- 4. "	4. II Amenument, Date of Original Filed (Month/Day/Year)									Line)							
(Street)																X Form filed by One Reporting Person						
REDMO	ND W	A 9	98052-639	99											Form filed by More than One Reporting							
					-											Pers		ie man On	е кер	orang		
(City)	(St	ate) (Zip)																			
(0.0)		(1	p)																			
		Tabl	e I - Nor	n-Deriv	ative/	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed					
1. Title of S	Security (Inst	r. 3)		2. Trans	saction				3.									6. Owners		7. Nature		
				Date	lDay/Va		Execution Date,			Transaction Disposed Code (Instr. 5)		d Of (D	l Of (D) (Instr. 3,		4 and Securi			Form: Direct (D) or Indirect	of Indirect Beneficial			
				(MOIILIII	(Month/Day/Year)		if any (Month/Day/Year)							Ow		d Following	(I) (Instr. 4)	Ownership				
												(A) or			- 1		Reported Transaction(s)			(Instr. 4)		
									Code	\ \	Amount	- [8	(D) Pric				3 and 4)					
Common Stock 12/14/						/14/2016				V	9,482	2 D		\$	\$0 2		25,241	D				
12/1/													<u> </u>				<u> </u>					
		Та	ble II - D								sed of, onvertib				y Ov	vned						
			('	e.g., p	uts, c	ans	s, warr	anıs,	options	s, cc	onvertib	ne se	ecum	ies)								
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any	Date,	ate, Transaction Code (Inst		on of E		6. Date Expiration (Month/Da	n Date	е	7. Title and Amount of Securities Underlying			8. Price of Derivative Security		9. Number of derivative Securities	Owne	: '	11. Nature of Indirect Beneficial		
(Instr. 3)			(Month/Da	ıy/Year)											(Instr. 5)		Beneficially Owned	Direction or Inc		Ownership (Instr. 4)		
Security							(A) or			Derivative Security (Instr				str. 3	3		Following		(I) (Instr. 4)	,		
							Disposed of (D) (Instr. 3, 4			and 4)							Reported Transaction	ı(s)	. [
														(Instr. 4)			· /]					
			ļ			and 5)								4								
			1											ount	it							
													or Nun	nber								
					0-4			[_,	Date		Expiration		of									
			l		Code	V	(A)	(D)	Exercisal	ne I	Date	Title	Sha	res								

Explanation of Responses:

Remarks:

Keith R. Dolliver, Attorney-in-

Fact for Christopher C.

12/20/2016

Capossela

** 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.