**ACTIVISION INC/NY** Form 4

May 17, 2007

# FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

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**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Kaminsky Robin

2. Issuer Name and Ticker or Trading Symbol

ACTIVISION INC /NY [ATVI]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

EVP, Publishing

(Last)

(First) (Middle) 3. Date of Earliest Transaction

Director

10% Owner

C/O ACTIVISION, INC., 3100

(Street)

(Ctata)

OCEAN PARK BLVD

(Month/Day/Year)

05/15/2007 below)

X\_ Officer (give title Other (specify below)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person

Form filed by More than One Reporting Person

SANTA MONICA, CA 90405

| (City)     | (State) (2          | Table              | I - Non-De  | erivative S | ecuriti | ies Acqu | ired, Disposed of | , or Beneficiall | y Owned      |
|------------|---------------------|--------------------|-------------|-------------|---------|----------|-------------------|------------------|--------------|
| 1.Title of | 2. Transaction Date |                    | 3.          | 4. Securit  |         |          | 5. Amount of      | 6.               | 7. Nature of |
| Security   | (Month/Day/Year)    | Execution Date, if | Transaction | on(A) or Di | sposed  | of (D)   | Securities        | Ownership        | Indirect     |
| (Instr. 3) |                     | any                | Code        | (Instr. 3,  | 4 and 5 | 5)       | Beneficially      | Form: Direct     | Beneficial   |
|            |                     | (Month/Day/Year)   | (Instr. 8)  |             |         |          | Owned             | (D) or           | Ownership    |
|            |                     |                    |             |             |         |          | Following         | Indirect (I)     | (Instr. 4)   |
|            |                     |                    |             |             | (4)     |          | Reported          | (Instr. 4)       |              |
|            |                     |                    |             |             | (A)     |          | Transaction(s)    |                  |              |
|            |                     |                    | C 1 W       |             | or      | ъ.       | (Instr. 3 and 4)  |                  |              |
|            |                     |                    | Code V      | Amount      | (D)     | Price    |                   |                  |              |

Common Stock, par

value 05/15/2007 F 1,043 D \$ 33,957 <u>(1)</u>

D

\$0.000001 per share

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | f 2.         | 3. Transaction Date | 3A. Deemed         | 4.         | 5.         | 6. Date Exer | cisable and | 7. Titl | le and      | 8. Price of | 9. Nu  |
|-------------|--------------|---------------------|--------------------|------------|------------|--------------|-------------|---------|-------------|-------------|--------|
| Derivative  | e Conversion | (Month/Day/Year)    | Execution Date, if | Transacti  | orNumber   | Expiration D | ate         | Amou    | ınt of      | Derivative  | Deriv  |
| Security    | or Exercise  |                     | any                | Code       | of         | (Month/Day/  | /Year)      | Under   | rlying      | Security    | Secui  |
| (Instr. 3)  | Price of     |                     | (Month/Day/Year)   | (Instr. 8) | Derivativ  | e            |             | Secur   | ities       | (Instr. 5)  | Bene   |
|             | Derivative   |                     |                    |            | Securities | S            |             | (Instr. | . 3 and 4)  |             | Owne   |
|             | Security     |                     |                    |            | Acquired   |              |             |         |             |             | Follo  |
|             |              |                     |                    |            | (A) or     |              |             |         |             |             | Repo   |
|             |              |                     |                    |            | Disposed   |              |             |         |             |             | Trans  |
|             |              |                     |                    |            | of (D)     |              |             |         |             |             | (Instr |
|             |              |                     |                    |            | (Instr. 3, |              |             |         |             |             |        |
|             |              |                     |                    |            | 4, and 5)  |              |             |         |             |             |        |
|             |              |                     |                    |            |            |              |             |         | A           |             |        |
|             |              |                     |                    |            |            |              |             |         | Amount      |             |        |
|             |              |                     |                    |            |            | Date         | Expiration  | T:41-   | or<br>Namel |             |        |
|             |              |                     |                    |            |            | Exercisable  | Date        |         | Number      |             |        |
|             |              |                     |                    | C-1- V     | (A) (D)    |              |             |         | of          |             |        |
|             |              |                     |                    | Code v     | (A) (D)    |              |             |         | Shares      |             |        |

# **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Kaminsky Robin C/O ACTIVISION, INC. 3100 OCEAN PARK BLVD SANTA MONICA, CA 90405

EVP, Publishing

### **Signatures**

/s/ George L. Rose (as attorney in fact)

05/17/2007

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

- 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).
- On May 15, 2007, restrictions lapsed with respect to 2,917 shares of restricted common stock held by Ms. Kaminsky. Pursuant to the terms of her restricted stock award, she elected to surrender to the Company 1,043 of such shares in order to satisfy the resulting **(1)** withholding tax obligation. As a result, as of that date Ms. Kaminsky held 32,083 shares of restricted common stock and 1,874 shares of common stock.

#### **Remarks:**

\*\*\*George L. Rose was granted power of attorney to sign all Forms 3, 4 and 5 on behalf of Ms. Kaminsky.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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