FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	20549	
vasilligion,	D.C.	20349	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:									

to Sect	tion 16. Form 4	or Form 5	0.,,		•••	٠.	., ., ., .					- 0			ll l		rage burde	ll.
	ions may conti tion 1(b).	nue. See		Filed			Section 16(a) 30(h) of the Ir						934		hours	per resp	oonse:	0.5
1. Name and Address of Reporting Person* Vanke Troy J				2. Issuer Name and Ticker or Trading Symbol Playtika Holding Corp. [PLTK] 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2023									heck all app Direc	olicable) etor er (give title	10%		o Owner er (specify	
(Last) (First) (Middle) C/O PLAYTIKA LTD. HACHOSHLIM ST 8													Cl	Chief Accounting Officer				
(Street) HERZLI PITUAC	1.3	3 4	672408		4. If Amendment, Date of Origi				f Original Filed (Month/Day/Year)					Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(City)	(St		(Zip)															
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					tion 2A. Deemed Execution Dat			3. Transaction Code (Instr. 8)		4. Securit	ies /	Acquired	d (A) or	5. Amo Securi Benefi Owned	ount of ties cially I Following	6. Own Form: I (D) or I (I) (Inst	Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount		(A) or (D)	(A) or Price Reported Transaction(s) (Instr. 3 and 4)					(Instr. 4)
Common Stock 01/15					2023		F		572		D	\$9.6	63 8	80,877		D		
		Tal					ies Acqu varrants,								d			
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year) if any		on Date,	Transaction of		Expiration Date (Month/Day/Year) S			A S U D	Amount of Securities		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following	Ov Fo Di or	D. wnership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Remarks:

/s/ Ashran Jen, as attorney in fact for Troy Vanke

Amount or Number

Shares

Security (Instr. 3 and 4)

Title

01/17/2023

Reported Transaction(s) (Instr. 4)

** 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).

Code

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.

(A) or Disposed of (D) (Instr. 3, 4

(A) (D) Date

Exercisable

Expiration Date