**1. Name and Address of Reporting Person**
Dzielak Robert J

**2. Issuer Name and Ticker or Trading Symbol**
Expedia Group, Inc. [ EXPE ]

**3. Date of Earliest Transaction (Month/Day/Year)**
05/15/2020

**5. Relationship of Reporting Person(s) to Issuer**
Officer (give title below)
Chief Legal Officer & Sec'y

**4. If Amendment, Date of Original Filed (Month/Day/Year)**
05/19/2020

**6. Individual or Joint/Group Filing (Check Applicable Line)**
Form filed by One Reporting Person

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

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Code</th>
<th>V</th>
<th>Amount (A) or (D)</th>
<th>Price</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Title</th>
<th>Amount or Number of Shares</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>05/15/2020</td>
<td>F</td>
<td>450(1)</td>
<td>D</td>
<td>$64.37</td>
<td>06/03/2020</td>
<td></td>
<td></td>
<td>35,238</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Title of Derivative Security (Instr. 3)</th>
<th>Conversion or Exercise Price of Derivative Security</th>
<th>Transaction Date (Month/Day/Year)</th>
<th>Deemed Execution Date, if any (Month/Day/Year)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)</th>
<th>Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>Title</th>
<th>Amount or Number of Shares</th>
</tr>
</thead>
</table>

**Explanation of Responses:**
1. Amended to disclose shares withheld to satisfy tax withholding obligation which were inadvertently underreported in the original Form 4 filing.

/s/ Michael S. Marron
Attorney-in-fact

06/03/2020

**Signature of Reporting Person**

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).


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.