FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|--------|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per respons | e: 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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. Name and Address of Reporting Person* GRAZIADIO G LOUIS III | | | | | 2. Issuer Name and Ticker or Trading Symbol ACACIA RESEARCH CORP [ACTG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|--|--|---|--------------|------------------------------------|--|---|---|--|---|-------|--------------------|--|--|---|--|---|----------|---|--|--|
| (Last) | (Fii VPORT CE | | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/17/2016 | | | | | | | | X Director Officer (give title below) | | | | 10% Owner Other (specify below) | | |
| (Street) NEWPO | CA | | 2660 Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 03/21/2016 | | | | | | | | Applic | Individual or Joint/Group Filing (Check oplicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day/ | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acc Disposed Of (D) (5) | | | | | | 5. Amo Securi Benefi Owned Report | ties cially Following | | : Direct | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transa | nsaction(s) tr. 3 and 4) | | ' ' | (Instr. 4) | |
| Common Stock 03/17/20 | | | | | | 016 | | | P | | 74,169 (1) | A | \$3.7 | 911 | 159,931 | | D | | | |
| | | Tab | le II - | | | | | | | | osed of, o | | | | Owne | d | | | | |
| Derivative Conversion | | 3. Transaction Date (Month/Day/Year | if any | eemed tion Date, n/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exer Expiration D (Month/Day/\) | | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | of Der Sec | Price ivative curity ctr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4) | y [| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerci | sable | Expiration Date | Title | Amount or Number of Shares | 1 | | | | | | |

Explanation of Responses:

1. Due to a typographical error, the original filing incorrectly reported the number of securities acquired on this date. This amendment corrects the number of securities acquired, while all other information (including the reporting person's aggregate shares beneficially owned following the reported transaction) was reported correctly in the original filing.

Remarks:

G. Louis Graziadio, III

06/07/2016

** Signature of Reporting Person Date

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

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.

^{*} 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).