#### LIPPARELLI MARK A

Form 4/A

October 13, 2017

# 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

0.5

(Instr. 4)

Estimated average burden hours per

**OMB APPROVAL** 

response...

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

Check this box

obligations may continue. See Instruction

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).

Common

Stock

08/31/2017(2)

(Print or Type Responses)

1. Name and A LIPPAREL	Person * 2. Issue Symbol	r Name <b>and</b>	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
	Galaxy	Gaming,	Inc. [GLXZ]	(Check all applicable)				
(Last)	(First) (N	Middle) 3. Date of	f Earliest Ti	ransaction				
		(Month/I	Day/Year)		_X_ Director	10%	Owner	
6767 SPEN	09/22/2	09/22/2017			title Other below)	er (specify		
	4. If Am	endment, Da	nte Original	6. Individual or Joint/Group Filing(Check				
LAS VEGA	`	Filed(Month/Day/Year) 09/08/2017			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
					reison			
(City)	(State)	(Zip) Tab	le I - Non-I	Derivative Securities Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)		

Code V

A

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.

Following

Reported

Transaction(s)

(Instr. 3 and 4)

350,000 (1)

(A)

or

(D)

Price

\$0

Amount

200,000

(Instr. 4)

 $D^{(1)}$ 

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

#### Edgar Filing: LIPPARELLI MARK A - Form 4/A

	. Title of	2.	3. Transaction Date (Month/Day/Year)		4.	5.	6. Date Exerc		7. Title and	8. Price of	9. Nu Derix
5	Derivative Security Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transacti Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	s I		Amount of Underlying Securities (Instr. 3 and 4	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
					Code V	<i></i>	Date Exercisable	Expiration Date	Title Amour or Number of	er	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
<b>FB</b>	Director	10% Owner	Officer	Other		
LIPPARELLI MARK A 6767 SPENCER ST. LAS VEGAS, NV 89119	X					

# **Signatures**

/s/ Mark
Lipparelli 10/12/2017

\*\*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).
- (1) Does not include 125,000 shares held of record by a trust of which the Reporting Person is the Trustee.
- The purpose of this Amended Form 4 is to correct the transaction code, the amount paid for the shares and the number of shares granted (2) to the Reporting Person on July 31, 2017. The original Form 4 listed shares which have not yet been granted, the grants of which are contingent on various milestones pursuant to a Board of Directors Services Agreement and Restricted Stock Grant Agreement.

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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