## FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response... 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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person* Zender William A				2. Issuer Name and Ticker or Trading Symbol Galaxy Gaming, Inc. [GLXZ]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X_ Director 10% Owner				
6767 SPI	ENCER S	(First) FREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/13/2019				-	Officer (give	title below)	Othe	r (specify below	)				
(Street)			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					
	GAS, NV		(7: )														
(City	у)	(State)	(Zip)			7	Γable	I - No	n-Deriv	vative S	Securitie	s Acquir	red, Disposed	of, or Benef	ficially Owne	d	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	r) any	ition I	emed ion Date, if	(Instr. 8)		(A	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficial Owned Following Reported Transaction(s)		d	Ownership o	Beneficial
				(Mont	th/Day	y/Year)	Co	do	V A	mount	(A) or (D)	Price	or I		or Indirect	Ownership Instr. 4)	
Common	Stock		09/13/2019				N			5,000	Δ	2	193,467			D	
			Table II					a quired	currer , Dispo	ntly val	or Benef	3 contro	to respond of number.	aniess the	ioiiii uispia	ys	
1 Tid 6	12	3. Transaction	3A. Deemed	(e.g., p		alls, war 5. Numb					le securi	<del>T ′ </del>	and Amount	0 D.: £	9. Number o	f 10.	11. Natur
Security (Instr. 3)	Conversion	ersion Date (Month/Day/Year) of ative	Execution Date, if	Transaction of Deri Code (Instr. 8) Acquir or Disp of (D)		of Deriv Securitie Acquire or Dispo of (D) (Instr. 3	vative Expiration Date (Month/Day/Ye ed (A) osed			ate	of Ur Year) Secur		erlying	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form of Derivativ Security: Direct (D or Indirects)	of Indirect Beneficial Ownersh (Instr. 4)
				Code	V	(A)	(D)	Date Exerc	isable	Expii Date	ration	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Option	\$ 0.39	09/13/2019		M	2	25,000 (1)		09/3	0/2014	1 09/3	0/2019	Comr	125 000	\$ 1.84	325,000	D	

### **Reporting Owners**

P 4 0 Y 4	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Zender William A 6767 SPENCER STREET LAS VEGAS, NV 89119	X					

# Signatures

/s/ William A. Zender	09/13/2019
**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) Options were issued in connection with the Reporting Person's service as a consultant to the Issuer's Board of Directors. All options were exercisable on the date of grant and expire five years from the date of grant. This transaction represents an exercise of the referenced options.

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.