FORM 4

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

OMB APPROVAL					
OMB Number:	3235-0287				
Estimated average burden					
nours per response	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 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* Isaacs Michael Gavin			2. Issuer Name and Ticker or Trading Symbol Galaxy Gaming, Inc. [GLXZ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
6767 SPI) ENCER ST	(First) TREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2019				Office	r (give title belo	ow)	Other (specify b	elow)		
(Street) LAS VEGAS, NV 89119			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Bo					Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	(Instr. 8)				uired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amoun	(A) or (D)	(Instr. 3 and 4) Direct (D) or Indirect (I) (Instr. 4)		or Indirect (I)	Ownership (Instr. 4)		
Common	Stock		12/17/2019	12/17/2019	P		5,000	Δ	\$ 1.586	148,600)		D	
				Derivative Securit		the fred, D	form dis	splays a of, or Ben	curre reficial	ntly valid		spond unle trol numbe		
4 5714 0	l <u> </u>	la m		(e.g., puts, calls, w		-							2 40	
Security	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year) any	tte, if Transaction Code Year) (Instr. 8)	5. Number of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and Expiration (Month/Day/		xpiration Date h/Day/Year)		ount of derlying surities str. 3 and Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Ownershi (Instr. 4)		
				Code V	(A) (D)		e rcisable	Expiration Date	n Title	Amount or Number of Shares				

Reporting Owners

D 41 0 N 4	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Isaacs Michael Gavin 6767 SPENCER STREET LAS VEGAS, NV 89119	X					

Signatures

/s/ Michael G. Isaacs	12/23/2019
***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).

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.