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						•				
1. Name and Address of Reporting Person* Zender William A				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				
			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2020				Office	r (give title belo	ow)	Other (specify b	elow)			
			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							
LAS VEGAS, NV 89119 (City) (State) (Zip)			THE N D is do G				ured, Disposed of, or Beneficially Owned							
				1:			_			iirea, Disp	osea oi, or i	Seneticially		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficially Owned Following Reported Transaction(s)		6. Ownership Form:	Beneficial			
			(Month/Day/Year	Code	V	Amou	(A) or (D)	Price	(Instr. 3 a	nstr. 3 and 4)		` /		
Common Stock (1)		06/30/2020	06/30/2020	A	<u> </u>	10,00	10 A	\$ 1.34	262 267		D			
				Derivative Securit		the f	form di isposed	splays a o	curre eficial	ently valid		spond unle trol numbe		
1. Title of	2	3. Transactio		(e.g., puts, calls, w	arrants, oj 5.		, conve i ate Exei		T	itle and	O Duigo of	9. Number	of 10.	11. Nature
Derivative Security	Conversion or Exercise Price of Derivative Security		Execution Da	te, if Transaction Code (Instr. 8)	Number and		l Expiration Date onth/Day/Year)		Ame Und Seco	Amount of Underlying Securities (Instr. 3 and 4)	Derivative Security (Instr. 5)		Ownershi Form of Derivativ Security: Direct (D or Indirect	p of Indirect Beneficial Ownership (Instr. 4)
				Code V	(A) (D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Number of Shares				

Reporting Owners

D 41 O N 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	07/01/2020	
**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) Shares were received in connection with the Reporting Person's service on the Issuer's Board of Directors.

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.