Edgar Filing: SCIENTIFIC GAMES CORP - Form 4

| SCIENTIFIC | C GAMES CORI | Р | | | | | | | | | |
|--|---|-------|-----------------|---|--------------|---------|--------------------|--|--|---|--|
| September 1 | 6, 2016 | | | | | | | | | | |
| FORM 4 OMB A UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB OMB Number: Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Expires: | | | | | | | | OMB | 3235-0287 | | |
| | | | | | | | | Expires: Estimated a burden hou response | rs per | | |
| (Print or Type | Responses) | | | | | | | | | | |
| Kennedy David L Sy | | | Symbol SCIEN | 2. Issuer Name and Ticker or Trading Symbol SCIENTIFIC GAMES CORP [SGMS] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (M | | | | 3. Date of Earliest Transaction Month/Day/Year) 09/16/2016 | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | | | | - | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| LAS VEGA | AS, NV 89118 | | | | | | - | Form filed by Me Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tab | le I - Non-l | Derivative S | Securit | ies Acqu | ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | 3. Transactic Code (Instr. 8) Code V | | d of (Ē |)) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Class A Common Stock | 09/16/2016 | | | S | 100,000 | D | \$ 10.49 (1) | 121,765 | D | | |

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

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 control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | Date | Under Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu: Bene Own Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|----------------|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Kennedy David L C/O SCIENTIFIC GAMES CORPORATION 6650 S. EL CAMINO ROAD LAS VEGAS, NV 89118 | Х | | | | | |
| Signatures | | | | | | |
| /s/ Kelli E. Sterrett, attorney-in-fact for David I Kennedy | . 09/16/2016 | | | | | |
| **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).

The transaction was executed in multiple trades at prices ranging from \$10.33 to \$10.60. The price reported above reflects the weighted
 (1) average sale price. Details regarding aggregated sales transactions will be provided upon request by the Commission staff, the issuer, or a security holder of the issuer.

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.