FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

OMB APPROVAL							
OMB Number:	3235- 0104						
Estimated average burden							
hours per response:	0.5						

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

**SECURITIES** 

1. Name and Address of Reporting Person*  BATTLES MARK BERNARD		Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 09/03/2024  3. Issuer Name and Ticker or Trading Symbol Lottery.com Inc. [ LTRY ]								
(Last) (First 40 HOLMEFIEL)	t) (Middle) D COURT BELSIZ	 ∃		4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner Officer (give title below)  Controlling shareholder UCIL			5. If Amendment, Date of Original Filed (Month/Day/Year)				
GROVE		_					6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting				
(Street) LONDON X0	NW3 4TT	_					Person Form filed by More than One Reporting Person				
(City) (State	e) (Zip)										
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. I)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)					
COMMON				408,225	D						
COMMON				937,500		[	Controlling shareholder of United Capital Investments London ("UCIL")				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		ate	3. Title and Amount of S Underlying Derivative So (Instr. 4)			cise	ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.			
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares			or Indirect (I) (Instr. 5)	5)		

**Explanation of Responses:** 

/s/ Mark Bernard Battles

09/09/2024

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.

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 Number.