SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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

	ddress of Repo <u>G CHRIST</u> ON	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 08/29/2024 3. Issuer Name and Ticker or Trading Symbol Lottery.com Inc. [LTRY]								
(Last)	(First) S, PARK LA? X0 (State)	(Middle) NE GU8 5LA (Zip)			Issuer (Check a I	onship of Reporting III applicable) Director Officer (give Itle below)	10% C	wner (specify	File	d (Month/Day/ ndividual or Jo eck Applicable Form filed I Person	int/Group Filing Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						t of Securities lly Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
COMMON					2	478,106	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
, , , , , , , , , , , , , , , , , , ,			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Sec (Instr. 4)		curity Conversion Conversion		cise Form:	Ownership Form:	Ownership (Instr.
I - I -			Date Exercisable	Expiration Date	Title		Amount or Number of Shares	Price of Derivati Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	5)

Explanation of Responses:

/s/ Christopher Anderson

08/29/2024

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** Signature of Reporting Date Person

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

* 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.