FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

	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

SECURITIES

1. Name and Address of Reporting Person* MACAL WARREN		2. Date of E Requiring S (Month/Day 08/29/202	statement /Year)	3. Issuer Name and Ticker or Trading Symbol Lottery.com Inc. [LTRY]								
(Last) (First) (Middle) JBR RESORT, JUMDERIAH GATE			00/27/2024		Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Street) DUBAI,	C0	214042	-		Officer (give title below)	10% C Other below)	(specify (C	Form filed Person Form filed	by One Reporting by More than One			
(City)	(State)	(Zip)						Reporting	Person			
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					. Amount of Securities Beneficially Owned (Instr.)	3. Owner Form: I (D) or II (I) (Inst	Direct Owndirect	Nature of Indirect Beneficial Ownership (Instr. 5)				
COMMON					124,424	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 Secur Underlying Derivative Securi (Instr. 4)		4. Conversion or Exercise	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.				
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)				

Explanation of Responses:

/s/ Warren Macal

08/29/2024

** Signature of Reporting Person

Date

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.