FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Washington,	D.C. 20549		

OIVIB APP	ROVAL
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 1005-

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

1(c). S	ee Instruction 1	0.																	
Name and Address of Reporting Person* DODDS HAMISH					<u>Dav</u>	2. Issuer Name and Ticker or Trading Symbol Dave & Buster's Entertainment, Inc. [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
					PLA	PLAY]								DirectorOfficer (give title				Other (
(Last) (First) (Middle) 1221 S. BELT LINE RD., SUITE 500					3. Date of Earliest Transaction (Month/Day/Year) 12/13/2024										belov			below)	specify
(Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person					
COPPEL	L TX	7	5019											1		,		Ü	
(City)	(Sta	ate) (Ž	Zip)		Form filed by More than One Reporting Person										orung				
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	posed of	, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				4 and 5) Secu Bend Own		urities eficially ed Following		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 12/13/20					.024			P		10,000	A	\$27.3	31(1) 3		39,456		D		
		Tal	ble II								osed of, convertib				Owne	d			
1. Title of Derivative Conversion Security (Instr. 3) 2. Conversion Date (Month/Day/Year) Price of Derivative Security 3. Transaction Date Execution Date, if any (Month/Day/Year)			tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec	Price of erivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were bought in multiple transactions at prices ranging from \$27.28 to \$27.32, inclusive. The reporting person undertakes to provide to Dave & Buster's Entertainment, Inc., any security holder of Dave & Buster's Entertainment, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares bought at each separate price within the range set forth in footnote (1) to this Form 4.

Sherri M. Smith, Attorney-in-Fact 12/13/2024

** 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 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).

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.