FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
houre 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)

Instruction	n 1(b).		Filed pursuant to Section 16(a) of the Securities or Section 30(h) of the Investment Com			nours pe	er response:
1. Name and Address of Reporting Person* <u>Lehner Les</u>		2. Issuer Name and Ticker or Trading State & Buster's Entertainm PLAY		heck all	nship of Reporting applicable) Director Officer (give title	Person(s) to Issuer 10% Owner Other (speci	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/D	Day/Year)		pelow)	below)

					PLAY						,		er (give title		Other (s	specify		
(Last) (First) (Middle) 1221 S. BELT LINE RD., SUITE 500					3. Date of Earliest Transaction (Month/Day/Year) 04/19/2024							belov	,		below)			
					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ir	6. Individual or Joint/Group Filing (Check Applicable					
(Street) COPPEI	LL TX	ζ 7	′5019										Form	ı filed by On ı filed by Mo on		•		
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication													
							s box to indicate affirmative d								uction or writ	ten plan tha	it is inter	nded to
		Table	I - Nor	n-Deriva	tive Se	ecurit	ties Acq	uired,	Disp	osed of	f, oı	r Bene	eficia	ly Own	ed			
Date		2. Transac Date (Month/Da	Execution Date,		3. 4. Securitie Disposed (Code (Instr. 5)					Benefi	ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code V Amoun		Amount		(A) or (D) Price				Reported Transaction(s) (Instr. 3 and 4)			
Common	Stock			04/19/2	2024					157	T	D	\$0	2	8,977	D		
		Та					es Acqui arrants,							/ Owne	d	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/I	on Date,	4. Transact Code (In 8)	tion on str. I	of	6. Date I Expirati (Month/	on Dat		An Se Un De Se	Title and mount of ecurities nderlying erivative ecurity (li and 4)	; [i	i. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Own For Dire or li (I) (I	nership n: ct (D) ndirect nstr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)

Date

Exercisable

(D)

Explanation of Responses:

Sherri M. Smith, Attorney-in-

Amount or Number

Fact

Expiration Date

** Signature of Reporting Person Date

04/19/2024

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).

Code

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.