FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours nor resnance	0.5						

Direct (D) or Indirect

(I) (Instr. 4)

Ownership (Instr. 4)

Following

Transaction(s) (Instr. 4)

Reported

Owned

Instruc	ction 1(b).		File		nt to Section 16(a ction 30(h) of the					f 1934		<u> </u>	рогтооролоог	
1. Name and Address of Reporting Person*  Bowman Scott Justin				2. Issuer Name <b>and</b> Ticker or Trading Symbol  Dave & Buster's Entertainment, Inc. [ PLAY]							Check all	nship of Reportin applicable) pirector officer (give title elow)	ng Person(s) to 10% ( Other below	wner (specify
(Last) 2481 MA	(Fii ANANA DE	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/14/2021							/	nancial Offic	
(Street) DALLA (City)		· · · · · · · · · · · · · · · · · · ·	5220 Zip)	4. If Am	mendment, Date	of Orig	inal Fi	led (Month/Da	ay/Year)		ne) X F F	orm filed by On	p Filing (Check of the Reporting Per re than One Re	son
		Table	I - Non-Deriv	ative Se	ecurities Ac	quire	d, Di	sposed o	f, or B	enefici	ally O	wned		
1. Title of	Security (Ins		I - Non-Derive 2. Transacti Date (Month/Day	on 2A. Exe (Year) if a	ecurities Ac  A. Deemed xecution Date, any Month/Day/Year)	quire 3. Transa Code ( 8)	ction	sposed of 4. Securities Disposed Of	Acquire	d (A) or	5. Se Be	Amount of curities eneficially when Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
1. Title of	Security (Ins		2. Transacti Date	on 2A. Exe (Year) if a	A. Deemed xecution Date, any	3. Transa Code (	ction	4. Securities	Acquire	d (A) or	5. Se Be O' Tr	Amount of curities eneficially	Form: Direct (D) or Indirect	of Indirect Beneficial
1. Title of s			2. Transacti Date	on 2A. Exc (Year) if a	A. Deemed xecution Date, any	3. Transa Code ( 8)	ection Instr.	4. Securities Disposed Of	Acquire (D) (Inst	d (A) or r. 3, 4 and	5. Se Be Or Tr (Ir	Amount of ecurities eneficially when Following eported ansaction(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
		tr. 3)	2. Transacti Date (Month/Day	on 2A. Extrir a (Mo	A. Deemed xecution Date, any lonth/Day/Year)	3. Transa Code ( 8) Code	v V	4. Securities Disposed Of  Amount  1,000  posed of,	Acquire (D) (Inst	Price \$44.00	5. Se Be O' Re Tr (Ir	Amount of curities eneficially whed Following ported ansaction(s) str. 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership

## **Explanation of Responses:**

Price of Derivative

Security

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on April 7, 2021.

Code

2. The price reported in Column 4 is a weighted average price. These shares were sold to multiple transactions at prices ranging from \$44.00 to \$44.01, 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 sold at each separate price within the range set forth in footnote (2) to this Form 4.

Date

Exercisable

Securities Acquired

Disposed

of (D) (Instr. 3, 4 and 5)

(A) (D)

## Remarks:

Sherri M. Smith, Attorney-in-05/14/2021

Security (Instr. 3 and 4)

Amount Number

Shares

Derivative

Title

**Fact** 

Expiration

Date

\*\* 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.