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SCIENTIFIC Form 4	C GAMES CO	RP									
May 15, 2014	4										
FORM	ГЛ									PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE	COMMISSION	OMB Number:	3235-0287	
Check thi if no long	ter.								Expires:	January 31 2005	
subject to Section 1 Form 4 of Form 5 obligation	F CHANGES IN BENEFICIAL OWNERSHIP SECURITIES Section 16(a) of the Securities Exchange Act of 193 Public Utility Holding Company Act of 1935 or Se						Estimated average burden hours per response				
may conti <i>See</i> Instru 1(b).	inue.		of the Inv	•	•	• •			11		
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> COHEN PETER A			2. Issuer Name and Ticker or Trading Symbol SCIENTIFIC GAMES CORP				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(*))		A P 1 H \	[SGMS]						100		
	(First) N GROUP, IN DN AVENUE, 1		3. Date of (Month/D 05/13/20	-	ansaction			X_ Director Officer (give below)		6 Owner er (specify	
	(Street)			ndment, Dat th/Day/Year)	-			6. Individual or Jo Applicable Line) _X_ Form filed by 0			
NEW YORK	K, NY 10022							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ar) Executi any		Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	(A) o of (D)	Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Class A Common Stock	05/13/2014			М	1,494	A	\$0	252,397	D		
Class A Common Stock								4,400	I	By wife	
Class A Common Stock								9,500	I	By daughter	

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Class A			
Common	7,000	Ι	By son
Stock			

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

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	of Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4,		Underlying Securities		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	05/13/2014		М	1,494	<u>(1)</u>	(1)	Common Stock	1,494	\$

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
COHEN PETER A C/O COWEN GROUP, INC. 599 LEXINGTON AVENUE, 20TH FLOOR NEW YORK, NY 10022	Х					
Signatures						
/s/ Jack Sarno, attorney-in-fact for Peter A. Cohen	0	5/15/2014				
**Signature of Reporting Person		Date				
Evaluation of Deenenees	-					

Explanation of Responses:

* 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).

(1)

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In accordance with the terms of the applicable equity compensation plan, represents the accelerated vesting of one-fifth of award of restricted stock units (RSUs) granted on January 4, 2010 upon MacAndrews & Forbes Holdings Inc. becoming the beneficial owner of at least 40% of the issuer's voting securities (such RSUs otherwise would have vested on January 4, 2015). The award has fully vested. Each unit converted into a share of common stock on a one-for-one basis. As previously disclosed by the issuer, the reporting person has agreed to certain transfer restrictions and forfeiture provisions with respect to 50% of these shares that are designed to replicate to the extent practicable the original vesting provisions of the RSU award.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.