FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL							
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).

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

Name and Address of Reporting Person* Kozko Dmitry.				2. Issuer Name and Ticker or Trading Symbol Motorsport Games Inc. [MSGM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
KUZKO	<u>ייווווע</u>			-						X	Director			10% Ow	ner			
(Last)	(F	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)						X	Officer (give title below)			Other (s below)	pecify		
C/O MOTORSPORT GAMES INC.					01/12/2021						Chief Executive Officer							
5972 NE	4TH AVE	NUE																
					1. If Am	endment, Da	ate of	Original I	=iled ((Month/Day	/Year)		6. Individual or Joint/Group Filing (Check Applicable					
(Street)												Line)	Form file	ad by One	Donor	ting Doroon		
MIAMI	F	L	33137									_ ^		Form filed by One Reporting Person Form filed by More than One Reporting				
(City)	(5	State)	(Zip)									Person				iiig		
		T	able I - Non-D	Derivat	ive S	ecurities	Acc	uired,	Dis	posed of	f, or Ber	eficially	Owned					
		Da	Transact	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a)			d (A) or r. 3, 4 and 5)	5. Amount of Securities Beneficially		6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial				
			("						ionunbay		Owned Fo	ollowing (i) (Ir		str. 4) C	Ownership			
				Code V Amount (A) or Pr		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)							
Class A Common Stock 01/1			01/12/2	021			A		20,333	33 ⁽¹⁾ A		20,333			D			
			Table II - De			curities <i>A</i> Ils, warra							wned					
	1				is, ca	· ·								1			1	
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. Transa Code) 8)				e of Securities		ies g Security	Derivative Security		er of e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
								Amount	1	Transacti (Instr. 4)	ion(s)							
				Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Number of Shares						
Stock Option (right to buy)	\$20	01/12/2021		A		203,333 ⁽²⁾		(2)		01/12/2031	Class A Common Stock	203,333	\$0	203,333		D		
Stock Option (right to	\$20	01/12/2021		A		26,410 ⁽³⁾		(3)		01/12/2031	Class A Common Stock	26,410	\$0	26,41	.0	D		

Explanation of Responses:

- 1. Represents restricted shares awarded to the reporting person outside of the Motorsport Games Inc. 2021 Equity Incentive Plan (the "Plan"), which vested immediately. The grant of the award was approved by the compensation committee of the board of directors of Motorsport Games Inc. (the "Company") and by the Company's sole stockholder at the time of grant.
- 2. Represents stock options awarded to the reporting person outside of the Plan, which vested immediately. The grant of the award was approved by the compensation committee of the board of directors of the Company and by the Company's sole stockholder at the time of grant.
- 3. Represents stock options awarded to the reporting person under the Plan, which will vest in three equal annual installments beginning on January 12, 2022.

/s/ Dmitry Kozko

01/14/2021

** 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.