

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
CHARY RAM					Everi Holdings Inc. [GCA]												
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)									X Director 10% Owner			
														X Officer (give title below) Other (specify below)			
7250 S TENAYA WAY, SUITE 100					0/10/2017								President	& CEO			
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)									6. Individual or Joint/Group Filing (Check Applicable Line)			
LAS VEGAS	, NV 891	113											V F	1. 110	D		
(City) (State) (Zip)														X _ Form filed by One Reporting Person Form filed by More than One Reporting Person			
		Tab	ole I - Non	-Deri	vativ	ve Securi	ities A	.cq	uired,	Dis	pose	d of,	or Beneficiall	y Owned			
				2. Tra Date		2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)			ispo	sed of (D) Follow			ount of Securities Beneficially Owned ving Reported Transaction(s) 3 and 4)			7. Nature of Indirect Beneficial Ownership
					any		Code	v	Amount	(A) or (D)	Pri	ce					
Common Stock 8/10					2015		P		10608	A	\$4.99	(1)	22	225608			
Common Stock 8/11					2015		P		89392	A	\$5.16	(2)	315000			D	
Tab	ole II - De	rivati	ive Securi	ties B	enef	icially O	wned	(e	.g. , pı	ıts,	calls	, war	rrants, options	, convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)		ative	Execution C Date, if (1 any	rans. Code	Deri Secu Acqu Disp	umber of vative crities uired (A) or osed of (D) r. 3, 4 and	and Expiration Date				7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		Inderlying Security	Derivative Security (Instr. 5)	of derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	Beneficial
				Code V	(A)	(D)		sab	le Date	aciOil	Title	Shares			(s) (Instr. 4)		

Explanation of Responses:

- (1) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$4.96 to \$5.03, inclusive. The reporting person undertakes to provide to Global Cash Access Holdings, Inc., any security holder of Global Cash Access Holdings, 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 above.
- (2) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$5.10 to \$5.20, inclusive. The reporting person undertakes to provide to Global Cash Access Holdings, Inc., any security holder of Global Cash Access Holdings, 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 above.

Reporting Owners

Panarting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
CHARY RAM 7250 S TENAYA WAY SUITE 100 LAS VEGAS, NV 89113	X		President & CEO					

Signatures

/s/ Ram V. Chary, by Juliet Lim, Attorney in Fact

8/12/2015

** 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 control number.