

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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nours per response	e 0.5			

INITIAL STATEMENT OF 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

(Print or Type Responses)										
Name and Address of Reporting Person * Lewin Jerry	2. Date of Event Requir Statement (Month/Day/ 05/06/2021		quiring Oay/Year) 3. Issuer Name and Ticker or Trading Symbol Allied Esports Entertainment, Inc. [AESE]							
(Last) (First) (Middle) 17877 VON KARMAN AVENUE, SUITE 300	0.5/00/2021				4. Relationship of Issuer (Check X Director	Reporting Person all applicable)	Filed(Mon	5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) IRVINE, CA 92614					Officer (give titl below)		6. Individ	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						wned		
1.Title of Security (Instr. 4)	2. Amount of Se Beneficially Ow (Instr. 4)			ally Owr	ned		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	Stock 0					D				
Reminder: Report on a separate line for each clas			•		•			SEC 1473 (7-02)		
Persons who responding						his form are no	t required to res	spond		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)	2. Date Exer and Expirati (Month/Day/Ye	on Date ar) Expiration	Secur Secur (Instr	rities Un rity r. 4)	amount of derlying Derivativ t or Number of	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Reporting Owners

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Lewin Jerry 17877 VON KARMAN AVENUE, SUITE 300 IRVINE, CA 92614	X					

Signatures

/s/ Jerry Lewin	05/07/2021
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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.