FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

SIAILS	SECONTIES AND EXCHANGE	COMMISSIO
	Washington D.C. 20540	

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

0.5

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Mosley Valerie					2. Issuer Name and Ticker or Trading Symbol DraftKings Inc. [DKNG]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) University Director 10% Owner					
(Last) (First) (Middle) C/O DRAFTKINGS INC.					3. Date of Earliest Transaction (Month/Day/Year) 11/07/2024									Officer (give title below)			Other (s below)	pecify	
222 BERKELEY STREET, 5TH FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) BOSTON MA 02116														Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tal	ble I - Non-	-Deriva	ative	Sec	curitie	es Acq	uired,	Dis	osed of	, or Ben	eficially	y Owned					
Date				2. Transa Date (Month/D	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			d (A) or r. 3, 4 and	5. Amour Securities Beneficia Owned F	s Form ally (D) o ollowing (I) (Ir		: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			Instr. 4)		
Class A Common Stock 11/07/					/2024	.024		M		384	4 A		36,	36,073		D			
			Table II - D								osed of, onvertib			Owned					
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			Co	Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Co	ode V	,	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	on(s)			
Restricted Stock Units	(1)(2)	11/07/2024		A	A		384 ⁽³⁾		(4)		(4)	Class A Common Stock	384	\$0.00	384		D		
Restricted Stock Units	(1)(2)	11/07/2024		N	И			384 ⁽³⁾	(4)		(4)	Class A Common Stock	384	\$0.00	0		D		

Explanation of Responses:

- 1. No shares of Class A Common Stock were transferred or sold upon the vesting of the restricted stock units ("RSUs").
- 2. Each RSU represents a contingent right to receive one share of the Issuer's Class A Common Stock.
- 3. Represents RSU grant that is being issued in lieu of a quarterly cash retainer.
- 4. The RSUs were granted and became fully vested on November 7, 2024.

/s/ Faisal Hasan, attorney-in-

fact

11/08/2024

** 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.