FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

0.5

hours per response:

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

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

IIIStiuc	uon io.																		
1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol DraftKings Inc. [DKNG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
WALDEN MARNI M						Diatrixings inc. [DKNO]								Directo	r		10% Ow	ner	
(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													Form filed by One Reporting Person Form filed by More than One Reporting Person				- 1		
(City)	City) (State) (Zip)																		
		Та	ble I - Nor	ı-Deriv	vativ	re Se	curitie	s Acq	uired,	Dis	posed of	f, or Ben	eficially	y Owned					
1. Title of Security (Instr. 3) 2. Trans Date (Month/I						2A. Deemed Execution Date, if any (Month/Day/Year		on Date,	3. Transaction Code (Instr. 3, 4) 5) 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)				5. Amour Securitie Beneficia Owned F Reported	s Formally (D) o		Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transacti	ansaction(s) str. 3 and 4)			(Instr. 4)	
Class A Common Stock 11/07/					7/202	7/2024			M		481 A		(1)	182	182,759		D		
	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 D if any (Month/Day/	ate, T	, Transaction Code (Instr. 8)		Derivative		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)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)),i(3)			
Restricted Stock Units	(1)(2)	11/07/2024			A		481 ⁽³⁾		(4)		(4)	Class A Common Stock	481	\$0.00	481		D		
Restricted Stock Units	(1)(2)	11/07/2024			M			481 ⁽³⁾	(4)		(4)	Class A Common Stock	481	\$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.