FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number: 3235-02									
Estimated average burden									
hours per response:	0.5								

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

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		70(1.1) 01 1.1.				прапу Аст С	. 20 .0							
Name and Address of Reporting Person* Attal Alain					2. Issuer Name and Ticker or Trading Symbol GameStop Corp. [GME]								(Ched	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Attarriam					1-1-1-1								⊣ Х	Direc	tor		10% O	wner	
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023										Office belov	er (give title v)		Other (s	specify		
625 WESTPORT PKWY					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Ind	6. Individual or Joint/Group Filing (Check Applicable Line)					
(()4,4)															X Form filed by One Reporting Person				
(Street) GRAPE	VINE 7	'X 7	6051												Form filed by More than One Reporting Person				
(City)	(State) (2	Zip)		Rule 10b5-1(c) Transaction Indication														
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																		
		Table	I - No	n-Deriva	tive S	ecui	ities A	cqı	uired,	Dis	posed of	, or I	Bene	eficial	ly Owr	ned			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/				/Year)	eemed ution Date, th/Day/Year)		Transaction Disposed Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3,			5. Amo Securi Benefi Owned Follow	ties cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	٧	Amount	(A) (D)		rice		action(s) 3 and 4)				
Class A Common Stock 06/09/20					.023			P		10,000) A \$		522.4 ⁽¹⁾	538,692 ⁽²⁾			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)			ution Date,	4. Transaction Code (Instr. 8)		5. Number of Derivativ Securitie Acquirer (A) or Dispose of (D) (Instr. 3, and 5)	ve es d	s I		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y D O (I	0. Dwnership orm: Direct (D) r Indirect) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A) (D		Date Exercisa	able	Expiration Date	Title	Amo or Num of Shar	ber					

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 \$22.20 to \$22.63, inclusive. The reporting person undertakes to provide to GameStop Corp., any security holder of GameStop Corp., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in this footnote.

2. On July 21, 2022, the Issuer effected a 4-for-1 stock split of its Class A common stock in the form of a stock dividend, as a result of which the Reporting Person received an additional 396,519 shares of Class A common stock.

Remarks:

/s/ Diana H. Saadeh-Jajeh, Attorney-in-Fact

06/09/2023

** 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.