UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIESM

December 31, Expires: Estimated average burden Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section hours per response

OMB APPROVAL

3235-0104

0.5

OMB

Number:

17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*	Requiring Statement (Month/Day/Year)	Issuer Name and Ticker or Trading Symbol GameStop Corp. [GME]				
KELLY THOMAS N JR			5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Last) (First) (Middle) C/O GAMESTOP CORP., 625 WESTPORT PARKWAY		(Check all applicable) X Director Officer (give title below) Officer (give below) Officer (give below) Other (specify below) 6. Individual or Joint/Group Filit (Check Applicable Line) X Form filed by One Reporting Person	ng			
(Street) GRAPEVINE TX 76051		Form filed by More than One Reporting Person				
(City) (State) (Zip)						

Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)	2. Amount of Securities Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
No securities are beneficially owned.	0	D						

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4)	Expiratio	2. Date Exercisable and Expiration Date (Month/Day/Year) 3. Title and Amount of Securities Underlying Derivative Security (Ins 4)		ring	or Excercise	Form:	6. Nature of Indirect Beneficial Ownership		
	Date Exercisable	Expiration Date	Title	Amount or Number of SharesM	Price of Derivative Security	or Indirect (I) (Instr. 5)	(Instr. 5)		

Explanation of Responses:

/s/ Thomas N. Kelly Jr. 07/26/2012 ** Signature of Reporting

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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.