SEC Form 4

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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

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

| Instruction 1(b). | Fil | ed pursuant to Section 16(a) of the Securities Exchange Act of 193 | hours per | response: 0.5 | | | |
|---|---------------|--|-----------|---|--------------------------------------|--|--|
| | | or Section 30(h) of the Investment Company Act of 1940 | | | | | |
| 1. Name and Address of Reporting F MCGILL DENNIS | Person* | 2. Issuer Name and Ticker or Trading Symbol <u>CREATIVE REALITIES, INC.</u> [CREX] | | ionship of Reporting P all applicable) Director | erson(s) to Issuer 10% Owner | | |
| (Last) (First) 13100 MAGISTERIAL DRIV | (Middle) E | 3. Date of Earliest Transaction (Month/Day/Year) 10/25/2021 | - | Officer (give title below) | Other (specify below) | | |
| SUITE 100 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indivi | dual or Joint/Group Fil | loint/Group Filing (Check Applicable | | |
| (Street) LOUISVILLE KY | 40223 | _ | X | Form filed by One Re Form filed by More th Person | | | |
| (City) (State) | (Zip) | | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|---|---------------------|---|------------------------------------|---|---|---|
| | | | Code | v | Amount (A) or Price | | Transaction(s) (Instr. 3 and 4) | | (| |
| Common Stock, \$.01 par value | 10/25/2021 | | A | | 4,630 | A | \$ <mark>0</mark> | 36,769 | 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 Date, if any (Month/Day/Year) | 4. Transa Code (8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 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) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

Remarks:

Exhibit 24.1 Power of Attorney filed with Form 3 on 11/8/2019 and incorporated herein by reference.

/s/ Will Logan, as attorney-infact for Dennis McGill 10

10/26/2021

** 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.