FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| <i>N</i> ashington, | D.C. | 20549 |
|---------------------|------|-------|
|---------------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL             |       |  |  |  |  |  |  |
|--------------------------|-------|--|--|--|--|--|--|
| OMB Number: 3235-0287    |       |  |  |  |  |  |  |
| Estimated average burden |       |  |  |  |  |  |  |
| hours per response       | : 0.5 |  |  |  |  |  |  |

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

| Name and Address of Reporting Person*     MCGILL DENNIS       |  |          |         |                                   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol CREATIVE REALITIES, INC. [ CREX ] |   |  |                  |        |                    |  |                         |                               | ck all app  | tor  | ng Pers | 10% O  | wner   |            |  |
|---|--|----------|---------|-----------------------------------|--|---|--|------------------|--------|--------------------|--|-------------------------|-------------------------------|---|--|---------|--|--|------------|--|
| (Last) (First) (Middle) 13100 MAGISTERIAL DRIVE               |  |          |         |                                   | 3. Date of Earliest Transaction (Month/Day/Year) 04/17/2020                          |   |  |                  |        |                    |  |                         |                               | below   | er (give title<br>v)   |         | Other (below)  | specify  |            |  |
| SUITE 1   |  |          |         |                                   | 4. If A  |   |  |                  |        |                    |  |                         |                               | 6. Inc  | . Individual or Joint/Group Filing (Check Applicable ine)  |         |  |  |            |  |
| (Street) LOUISV   | TLLE I   | XY 4     | 10223   |                                   |  |   |  |                  |        |                    |  |                         |                               | X   | X Form filed by One Reporting Person Form filed by More than One Reporting   |         |  |  |            |  |
| (City)  | (  | State) ( | Zip)    |                                   |  |   |  |                  |        |                    |  |                         |                               |   | Perso  | on      |  |  |            |  |
|   |  | Table    | l - Noi | n-Deriva                          | tive \$  | Secu  | rities   | Acq              | uired, | Dis                | osed of  | , or E                  | Bene                          | ficiall   | y Own  | ed      |  |  |            |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Date) |  |          |         | Execution Date,                   |  | 3. 4. Securities Acquire Disposed Of (D) (Inst S)     |  |                  |        | Benefic<br>Owned   | ies<br>cially<br>Following   | Form:                   | Direct<br>Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |         |  |  |            |  |
|   |  |          |         |                                   |  |   |  |                  | Code   | v                  | Amount   | (A)<br>(D)              | or I                          | Price   | Reported<br>Transaction(s)<br>(Instr. 3 and 4)   |         |  |  | (Instr. 4) |  |
| Common Stock, \$.01 par value 04/1                            |  |          |         |                                   | /2020  |   | A  |                  | 8,013  | A                  |  | \$ <mark>0</mark>       | 12,098                        |   |  | D       |  |  |            |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |          |         |                                   |  |   |  |                  |        |                    |  |                         |                               |   |  |         |  |  |            |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)           | Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any  |          |         | Transaction<br>Code (Instr.<br>8) |  | of<br>Deriv<br>Secu<br>Acqu<br>(A) o<br>Disp<br>of (D | vative<br>urities<br>uired<br>or<br>osed<br>)<br>r. 3, 4 | Expiration Da    |        | te                 | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Ins<br>3 and 4) |                         | Str.                          | Price of<br>erivative<br>ecurity<br>1str. 5)        | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | y C     | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |            |  |
|   |  |          |         |                                   | Code V (A) (   |   | (D)  | Date<br>Exercisa | able   | Expiration<br>Date | Title  | or<br>Num<br>of<br>Shar | ber                           |   |  |         |  |  |            |  |

**Explanation of Responses:** 

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

/s/ Will Logan, as attorney-in-

<u>fact</u>

\*\* Signature of Reporting Person Date

04/17/2020

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.