### Edgar Filing: POLINSKY DOUGLAS MICHAEL - Form 4

#### POLINSKY DOUGLAS MICHAEL

Form 4 May 19, 2010

# FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB

3235-0287

Check this box if no longer subject to

Washington, D.C. 20549

Number: January 31, Expires: 2005

**OMB APPROVAL** 

Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Estimated average burden hours per 0.5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

1(b).

(Print or Type Responses)

1. Name and Address of Reportin POLINSKY DOUGLAS M	_	2. Issuer Name and Ticker or Trading Symbol POKER MAGIC INC [POKR.OB]	5. Relationship of Reporting Person(s) to Issuer		
(Last) (First)	(Middle)	3. Date of Earliest Transaction	(Check all applicable)		
130 LAKE STREET WES 300	T, SUITE	(Month/Day/Year) 03/31/2010	_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below)  Chief Executive Officer		
(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
WAYZATA, MN 55391		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	Zip) Table	e I - Non-D	erivative Secu	ırities Acq	quired, Disposed o	of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	(	sed of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock				· ·		1,250,000	I	By Great North Capital Corp. (1)
Common Stock						140,000	I	By Minor children (2)
Common Stock						5,000	I	By Lantern Advisers LLC (3)
Common Stock	03/31/2010		A	60,000 A	\$ 0	763,500	D	

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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 control number.

SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration D	ate	Amou	nt of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired						
	·				(A) or						
					Disposed						
					of (D)						
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
									of		
				Code V	(A) $(D)$				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
POLINSKY DOUGLAS MICHAEL			Chief			
130 LAKE STREET WEST, SUITE 300	X	X	Executive			
WAYZATA, MN 55391			Officer			

## **Signatures**

/s/ Douglas M. Polinsky	05/17/2010			
**Signature of Reporting Person	Date			

# **Explanation of Responses:**

- \* 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).
- (1) A Minnesota corporation, of which the Reporting Person is founder and Chief Executive Officer.
- (2) The Reporting Person has no pecuniary interest in these shares and disclaims beneficial ownership.
- (3) A limited liability company, of which the Reporting Person is a member.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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