

(Print or Type Responses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* Marzola GianLuca	Statemen	2. Date of Event Requiring Statement (Month/Day/Year) — 03/14/2014			3. Issuer Name and Ticker or Trading Symbol A-Mark Precious Metals, Inc. [AMRK]			
(Last) (First) (Middle) 429 SANTA MONICA BLVD SUITE 230	03/14/2				Issuer	Reporting Person all applicable) 10% Owner	Filed(Mon	endment, Date Original hth/Day/Year)
(Street) SANTA MONICA, CA 90401					X Officer (give title below) Other (specify below) Chief Accounting Officer		6. Individed Applicable 1 X_ Form f	6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						Owned
1.Title of Security (Instr. 4)		В		nt of Sec ally Owr	ned		4. Nature of Indire (Instr. 5)	ect Beneficial Ownership
None		0				D		
Reminder: Report on a separate line for each clas	s of securitie	s beneficial	ly own	ed direct	tly or indirectly			SEC 1473 (7-02)
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unless the form displays a currently valid OMB control number.								
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4)	and Expirati	Date Exercisable d Expiration Date Securities Ur Security (Instr. 4)		mount of derlying Derivativ	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct 6. Nature of Inc Ownership (Instr. 5)	(Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amoun	t or Number of	Security	(D) or Indirect (I) (Instr. 5)	

Reporting Owners

		Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Marzola GianLuca 429 SANTA MONICA BLVD SUITE 2 SANTA MONICA, CA 90401	230		Chief Accounting Officer		

Signatures

/s/ Gianluca Marzola	03/24/2014
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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.

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