

(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

3. Issuer Name and Ticker or Trading Symbol

2. Date of Event Requiring

Name and Address of Reporting Person * Lepine Beverley	2. Date of Event Requiring Statement (Month/Day/Year) — 02/05/2015		1 0	3. Issuer Name and Ticker or Trading Symbol A-Mark Precious Metals, Inc. [AMRK]				
(Last) (First) (Middle) 429 SANTA MONICA BLVD., SUITE 230	4. Relat Issuer			Issuer	(Check all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) SANTA MONICA, CA 90401			Officer (give title Other (specify below)		Applicable I _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Security (Instr. 4)					4. Nature of Indire (Instr. 5)	Nature of Indirect Beneficial Ownership nstr. 5)		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02 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.								
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
. Title of Derivative Security 2. Date Exercisable and Expiration Date (Month/Day/Year)		on Date	3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)		Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
_	ate xercisable	Expiration Date	Title Amou Shares	nt or Number of	Security	(D) or Indirect (I) (Instr. 5)		

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Lepine Beverley 429 SANTA MONICA BLVD. SUITE 230 SANTA MONICA, CA 90401	X				

Signatures

/s/ Beverley Lepine	04/20/2015
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- 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.

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.