FORM	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

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

### STATEMENT OF CHANGES IN 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

Print or Type Responses) 1. Name and Address of Reporting Pe ROBERTS GREGORY N	2. Issuer Name an A-Mark Precior					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) (First) 429 SANTA MONICA BLVD	3. Date of Earliest 07/20/2015			-		_X_ Director     _X_10% Owner       _X_ Officer (give title below)     Other (specify below)						
(Street) SANTA MONICA, CA 90401	4. If Amendment, Date Original Filed(Month/Day/Year)						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 Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)	6. Ownership Form:	Beneficial		
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownershi (Instr. 4)		
Common Stock, par value \$0.01 per share	07/20/2015		S		1,000 (1)	D	\$ 10.5	99,256	D			
Common Stock, par value \$0.01 per share	07/21/2015		S		1,000 (1)	D	\$ 10.45	98,256	D			
Common Stock, par value \$0.01 per share								778,938	Ι	See footnote (2)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-02)

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### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Number and Expiration Date A		Amo	unt of	Derivative	Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)	any	Code		of	*		Unde	rlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	1	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	rities			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			0	Direct (D)	
					(A) or							1	or Indirect		
					Disposed								Transaction(s)	< / .	
					of (D)							(Instr. 4)	(Instr. 4)		
					(Instr. 3,		· · · ·								
						4, and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
									Date		of				
				Code	V	(A)	(D)				Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
ROBERTS GREGORY N 429 SANTA MONICA BLVD. SUITE 230 SANTA MONICA, CA 90401	Х	Х	Chief Executive Officer					

## Signatures

\*\*Signature of Reporting Person



# **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) Sales made pursuant to Rule 10b5-1 trading plan.
- (2) Shares beneficially owned by Silver Bow Ventures, LLC, which is 50% owned by the Reporting Person. The Reporting Person disclaims ownership of such shares in excess of his proportionate pecuniary interest in Silver Bow Ventures, LLC.

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.