FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* Solomon Lee Jay	2. Date of Even Requiring State (Month/Day/Yea 10/22/2021	ement	3. Issuer Name and Ticker or Trading Symbol Redbox Entertainment Inc. [RDBX]					
(Last) (First) (Middle) C/O REDBOX ENTERTAINMENT INC.			Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			If Amendment, Date of Original Filed (Month/Day/Year) Individual or Joint/Group Filing		
1 TOWER LANE, SUITE 800			Officer (give title below)	Other (specify below)		(Check Applicable Line) X Form filed by One Reporting Person		
OAKBROOK TERRACE IL 60181	,						by More than One Person	
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			. Amount of Securities			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
, ,			Beneficially Owned (Instr.	(D) or Ir	Direct (Ownership (Instr.	5)	
		ivative	Beneficially Owned (Instr.	(D) or Ir (I) (Insti	Direct of the condition	Ownership (Instr.	5)	
		ivative warran	eneficially Owned (Instr.) Securities Beneficia	(D) or Ir (I) (Insti	Direct of the condition	5. ion Ownership	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

/s/ Lee J. Solomon

10/26/2021

** Signature of Reporting Person

Date

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 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.

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.