FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>CARLINO PETER M</u>						2. Issuer Name and Ticker or Trading Symbol PENN NATIONAL GAMING INC [ PENN ]									Relationsh heck all ap X Dire	plicable)	g Person(s) to	Issuer Owner	
(Last) (First) (Middle) 825 BERKSHIRE BLVD SUITE 200							3. Date of Earliest Transaction (Month/Day/Year) 04/19/2006										Officer (give title Other (specify below)  Chairman & CEO		
(Street) WYOMISSING PA 19610					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lin	ie) <mark>X</mark> For For	lual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Executio		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5) Secu Bene	ficially ed Following	6. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										Code	v	Amount	(A) (D)	or	Price	Trans	saction(s) . 3 and 4)		(111501.4)
Common Stock <sup>(1)</sup> 04/19/2						2006	2006			S		71,850	D		\$42.5	02 2:	12,660 <sup>(2)</sup>	I	Sold by GRAT
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	on Da se (M	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	n Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercie Expiration Dat (Month/Day/Ye		е	7. Title and Amount of Securities Underlying Derivative Security (In and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res				

## **Explanation of Responses:**

1. Mr. Carlino is the trustee of the Grantor Retained Annuity Trust (GRAT) for which sales are reported. The GRAT transactions reported on this Form 4 were made pursuant to a stock trading plan, dated November 30, 2005, established pursuant to rule 10b5-1.

2. The reporting person is also the indirect beneficial owner of 10,082,073 shares, which are owned by The Carlino Family Trust, a greater than ten percent owner of the issuer, of which Peter M. Carlino is a Trustee and the direct owner of 1,540,246 shares. Peter M. Carlino disclaims beneficial ownership of the shares owned by the Carlino Family Trust and the Grantor Retained Annuity Trust, and this report should not be deemed an admission that Peter M. Carlino is the beneficial owner of such securities for the purpose of section 16 or any other purpose.

/s/Robert S Ippolito as attorney-in-fact for Peter M. 04/20/2006 Carlino

\*\* 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 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).

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.