FORM 4

obligations may continue. See

Instruction 1(b)

1. Title of Security (Instr. 3)

Common Stock

Common Stock

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL				
OMB Number:	3235-0287			
Estimated average burden				

6. Ownership

Form: Direct

(D) or Indirect (I) (Instr. 4)

0.5

7. Nature of

Indirect

(Instr. 4)

By

Beneficial

Ownership

Trusts(2)(3)

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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* <u>CARLINO PETER M</u>		Person*	2. Issuer Name and Ticker or Trading Symbol PENN NATIONAL GAMING INC [PENN]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Vother (specify	
(Last) 825 BERKSHIR	(First) E BLVD SU	(Middle) ITE 200	3. Date of Earliest Transaction (Month/Day/Year) 07/09/2019	below) Chairman Emeritus	
(Street) WYOMISSING (City)	PA (State)	19610 (Zip)	4. If Amendment, Date of 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	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned					

J⁽¹⁾ 07/09/2019 100,000 D \$0 4,930,923 I 751,926 D Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

Amount

Transaction

Code (Instr.

8)

Code ν 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and

(A) or (D)

Price

5. Amount of

Owned Following

(Instr. 3 and 4)

Securities

Reported

Beneficially

(e.g., puts, calls, warrants, options, convertible securities) 7. Title and 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 8. Price of 9. Number of 10. 11. Nature Derivative Conversion Execution Date **Expiration Date** Amount of Ownership Derivative (Month/Day/Year) Security or Exercise if anv Code (Instr. Derivative (Month/Day/Year) Securities Security Securities Form: Beneficial Direct (D) (Instr. 3) (Month/Day/Year) Beneficially Price of 8) Securities Underlying (Instr. 5) Ownership Derivative Acquired Derivative Owned or Indirect (Instr. 4) (A) or Disposed Security (Instr. 3 and 4) Following Security (I) (Instr. 4) Reported of (D) (Instr. 3, 4 Transaction(s) (Instr. 4) and 5) Amount Number Date Expiration Exercisable Code (A) (D) Title Shares

Explanation of Responses:

- 1. Shares distributed to a beneficiary under the Carlino Family Trust.
- 2. Includes 365,212 shares owned by a residuary trust for the benefit of Peter D. Carlino and Peter D. Carlino's children. The reporting person is a trustee of the residuary trust with shared voting and investment power. The reporting person disclaims beneficial ownership of the shares owned by the residuary trust, except to the extent to of his pecuniary interest therein, and this report should not be deemed an admission the reporting person is the beneficial owner of such securities for purposes of Section 16 or any other purpose.
- 3. Includes 4,565,711 shares held by the Carlino Family Trust, as to which Peter M. Carlino has sole voting power for certain matters. The reporting person disclaims beneficial ownership of the shares owned by the trust, except to the extent of his pecuniary interest therein, and this report should not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or any other purpose.

/s/ Elliot Hoops as attorney-in-07/11/2019 fact for Peter M. 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).

2. Transaction

(Month/Day/Year)

2A. Deemed

if any

Execution Date

(Month/Day/Year)

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.