Instruction 1(b).

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number:                 | 3235-0287 |
|-----------------------------|-----------|
| <br>Estimated average burde | n         |
| hours per response:         | 0.5       |

I

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*            |   |            |             |         |  | 2. Issuer Name and Ticker or Trading Symbol<br>PENN NATIONAL GAMING INC [ PENN ] |         |                                 |   |   |                    |                      |                                       | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |  |  |  |                                       |   |
|---|---|------------|-------------|---------|--|--|---------|---------------------------------|---|---|--------------------|----------------------|---------------------------------------|---|--|--|--|---------------------------------------|---|
| HANDLER DAVID A                                     |   |            |             |         |  |  |         |                                 |   |   |                    |                      |                                       | Х   | Directo  | r  |  | 10% Ov                                | vner  |
| (Last) (First) (Middle)                             |   |            |             |         |  | 3. Date of Earliest Transaction (Month/Day/Year)<br>01/29/2004                   |         |                                 |   |   |                    |                      |                                       |   | Officer<br>below)  | (give title                                |  | Other (s<br>below)                    | pecify  |
| 825 BERKSHIRE BLVD SUITE 200                        |   |            |             |         |  |  |         |                                 |   |   |                    |                      |                                       |   |  |  |  |                                       |   |
| (Chroat)  |   |            |             |         | . 4. 1                                   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                         |         |                                 |   |   |                    |                      |                                       | 6. Individual or Joint/Group Filing (Check Applicable Line)             |  |  |  |                                       | licable   |
| (Street)<br>WYOMI                                   | SSING PA  | A          | 19610       |         |  |  |         |                                 |   |   |                    |                      |                                       | Х   | Form fi  | led by One                                 | e Repo   | orting Person                         | ו   |
|   |   |            |             |         |  |  |         |                                 |   |   |                    |                      |                                       |   | Form filed by More than One Reporting<br>Person  |  |  |                                       | ting  |
| (City)  | (S  | tate)      | (Zip)       |         |  |  |         |                                 |   |   |                    |                      |                                       |   |  |  |  |                                       |   |
|   |   | Tal        | ble I - Nor | n-Deriv | vativ                                    | ve Se  | curitie | s Ac                            | cquired, I  | Dis   | posed o            | f, or Bei            | nefic                                 | ially   | Owned  |  |  |                                       |   |
| Date  |   |            |             |         |  | action 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Yea                 |         |                                 | Code (Ir  | Transaction Disposed Of (D) (Instr. 3,<br>Code (Instr. 5) |                    |                      |                                       | 4 and Securitie<br>Beneficia<br>Owned F                                 |  | es Form<br>ally (D) o<br>following (I) (Ir |  | : Direct<br>r Indirect<br>str. 4)     | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |
|   |   |            |             |         |  |  |         | Code                            | v   | Amount  | (A) or<br>(D)      | Pri                  | Price Reporte<br>Transac<br>(Instr. 3 |   | tion(s)  |  |  | (Instr. 4)                            |   |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned<br>(e.g., puts, calls, warrants, options, convertible securities) |            |             |         |  |  |         |                                 |   |   |                    |                      |                                       |   |  |  |  |                                       |   |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | rivative Conversion Date Execution Date,<br>curity or Exercise (Month/Day/Year) if any  |            |             | ate, T  | ransaction of<br>Code (Instr. Derivative |  |         | ive<br>ies<br>ed<br>ed<br>nstr. | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year)<br>(Instr. 3 and |   |                    | ties<br>Ig<br>e Secu |                                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                     | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |   |
|   |   |            |             | 0       | Code                                     | v  | (A)     | (D)                             | Date<br>Exercisable   |   | Expiration<br>Date | Title                | Amo<br>or<br>Num<br>of<br>Shar        | ber   |  |  |  |                                       |   |
| Non-<br>Qualified<br>Stock<br>Options               | \$24.3  | 01/29/2004 |             |         | A  |  | 30,000  |                                 | 01/29/2005 <sup>(</sup>   | 1)  | 01/29/2011         | Common<br>Stock      | 30,0                                  | 000   | \$0  | 30,00                                      | 0  | D                                     |   |

Explanation of Responses:

(right to buy)

1. Exercisable over 4 years at 25% per year

/s/Robert S Ippolito as attorney-02/02/2004

in-fact for David A Handler

\*\* 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.