Check this box Section 16. For obligations may

Instruction 1(b)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| if no longer subject to |  |
|-------------------------|--|
| m 4 or Form 5           |  |
| continue See            |  |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

| Name and Address of Reporting Person*     IPPOLITO ROBERT S |   |  |  |                  |   | 2. Issuer Name and Ticker or Trading Symbol PENN NATIONAL GAMING INC [ PENN ] |          |   |                 |  |               |  |  |                                   |        | k all applic<br>Directo                                  | ,   |   | 10% Ow   | vner   |  |
|---|---|--|--|------------------|---|---|----------|---|-----------------|--|---------------|--|--|-----------------------------------|--------|--|---|---|--|--|--|
| (Last) (First) (Middle)<br>825 BERKSHIRE BLVD SUITE 200     |   |  |  |                  |   | 3. Date of Earliest Transaction (Month/Day/Year) 04/18/2013                   |          |   |                 |  |               |  |  |                                   | X      | below)   |   | , Seci  | Other (s<br>below)<br>retary/Trea  |  |  |
| (Street) WYOMISSING PA 19610 (City) (State) (Zip)           |   |  |  | 4. 11            | f Ame                                   | endme   | nt, Date | of Origin   | al File         | d (Mo  | onth/Day      | //Year)  |  | 6. Ind<br>Line)<br>X              | Form f | led by One   | Repo  | (Check Apporting Person   | n  |  |  |
| (City)  | (-  |  |  | n Davis          |   | - 6-  |          |   |                 |  |               |  | D.   | 6: .                              | :-!!   | O  |   |   |  | <u> </u>   |  |
| 1. Title of Security (Instr. 3)                             |   |  |  | 2. Trans<br>Date | 2. Transaction                          |   |          | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) |                 | 3.<br>Transaction<br>Code (Instr.                    |               | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4 |  |                                   |        | 5. Amou<br>Securitie<br>Beneficia<br>Owned F<br>Reported | es<br>ally<br>Following   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |  | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |  |
|   |   |  |  |                  |   |   |          |   | Code            | · v  | An            | nount  | (A) or<br>(D)  | Pric                              | е      | Transact<br>(Instr. 3                                    | ion(s)  |   |  | (Instr. 4)   |  |
| Common  | Common Stock <sup>(1)</sup>   |  |  |                  | 04/18/2013                              |   |          |   | М               |  | 1             | 10,000   | A  | \$2                               | 9.22   | 49,607   |   |   | D  |  |  |
| Common  | Stock <sup>(1)</sup>  |  |  | 04/18            | 3/2013                                  | 3   |          |   | S               |  | 1             | 10,000   | D  | \$5                               | 57.5   | 39,  | 607   | D   |  |  |  |
| Common  | Stock   |  |  |                  |   |   |          |   |                 |  |               |  |  |                                   |        | 2,   | 400   | I <sup>(2)</sup> By Son   |  |  |  |
|   |   |  | Table II -                                     |                  |   |   |          |   |                 |  |               |  | or Ben<br>le secu  |                                   |        | Owned  |   |   |  |  |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)         | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Day | Date,            | 4.<br>Transaction<br>Code (Instr.<br>8) |   | ı of     |   | Expirati        | 6. Date Exercisa<br>Expiration Date<br>Month/Day/Yea |               |  | 7. Title and Amoun<br>of Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |                                   | 1      | 3. Price of<br>Derivative<br>Security<br>Instr. 5)       | 9. Number<br>derivative<br>Securities<br>Beneficial<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | e<br>s<br>ally<br>g   | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |   |  |  |                  | Code                                    | v   | (A)      | (D)   | Date<br>Exercis | able   | Expir<br>Date | ration   | Title  | Amou<br>or<br>Numb<br>of<br>Share | oer    |  |   |   |  |  |  |
| Non<br>Qualified<br>Stock<br>Options<br>(right to           | \$29.22   | 04/18/2013                                 |  |                  | М                                       |   |          | 10,000  | 01/06/2         | 006  | 01/06         | 5/2015   | Common<br>Stock  | 10,0                              | 00     | \$0  | 66,578  | 3   | D  |  |  |

## **Explanation of Responses:**

buy)

- 1. These transactions on this Form 4 were made pursuant to a stock trading plan, executed by Mr. Ippolito on December 5, 2012, established pursuant to rule 10b5-1.
- 2. Mr. Ippolito disclaims beneficial ownership of these shares owned his son, 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/Robert S Ippolito

04/22/2013

\*\* 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.