FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

| OMB APPROVA | ٩L | |
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OMB Number: Estimated average burden hours per response: 0.5

| Name and Address of Reporting Person* WILMOTT TIMOTHY J | | | | | | 2. Issuer Name and Ticker or Trading Symbol PENN NATIONAL GAMING INC [PENN] | | | | | | | | | | Relationship eck all appli X Directo | cable) or | ng Per | 10% C | wner |
|---|---|--|--|------------|-------|---|-----|-------|-----------------------------|--|--|--------------------|---|---|------------------------------|---|--------------|--|---|---------------------------------------|
| | ast) (First) (Middle) 5 BERKSHIRE BLVD JITE 200 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/24/2015 | | | | | | | | | | X Officer below) | | Other (s below) nt & CEO | | |
| (Street) | SSING P | | 19610 (Zip) | | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Lin | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| | | | le I - No | | | _ | | | <u> </u> | ed, C |)is | | _ | | | ly Owned | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Co | Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | Securiti Benefic Owned | 5. Amount of Securities Beneficially Owned Following Reported | | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Co | de V | , | Amount | | (A) or (D) | Price | Transac (Instr. 3 | tion(s) | | | (instr. 4) |
| Common Stock | | | | 02/24/2015 | | 5 | | | N | 1 | | 15,59 | 2 | A | (1) | 254 | 4,215 | | D | |
| Common | nmon Stock | | 02/24/2015 | | 5 | | | I | | | 15,59 | 2 | D | \$16.2 | 23 | 8,623 | | D | | |
| | | Т | | | | | | | | | | osed of onverti | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | | ransaction ode (Instr. | | of I | | e Exer tion D h/Day/ | ate | able and | 7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | | e O s Fe lly D oi | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | Expiration Date Title Amount or Number of Shares | | | | | | | | | | |
| Phantom Stock Unit | (1) | 02/24/2015 | | | M | | | 9,634 | (: | .) | | (1) | | nmon ock | 15,592 | (1) | 46,77 | 6 | D | |

Explanation of Responses:

1. The recipient receives a cash payment for each unit equal to the fair market value on the vesting date of one share of the Company's common stock. Of the original award of phantom stock units, 15,592 units vested on February 24, 2015. The remaining phantom stock units will vest as follows: 15,592 units on February 24, 2016, 15,592 on February 24, 2017 and 15,592 on February 24, 2018.

> /s/ Christopher Rogers as attorney-in-fact for Timothy J 02/26/2015 Wilmott

** 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.