FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-	

OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* MATHER COURTNEY				2. Issuer Name and Ticker or Trading Symbol Caesars Entertainment, Inc. [CZR]									5. Relationship of Reporting Person(s) to (Check all applicable) X Director 10%						
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2024									Office	er (give title		Other (s	specify	
100 WEST LIBERTY STREET, 12TH FLOOR				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)													X	, ,					
RENO	NV	7 8	39501												Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)		Rul	Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	on-Deriva	tive S	Secui	rities	Ac	quired	d, Dis	posed of	, or E	Benef	ficially	Own	ed			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/			Execution Da			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		or I and 5)	Securit Benefic Owned	urities For Form Form Form Following (I)		Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) (D)	or Pi	rice		ed ction(s) 3 and 4)			(Instr. 4)		
Common	Stock			04/01/20	024				A		868.6588 ⁽¹⁾ A		\$	43.17	17 37,349.4727		.4727 D		
		Tal	ble II								osed of, c				Owned	d			
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date urity or Exercise (Month/Day/Year) if any			Transaction of Code (Instr. Derivative		rative rities nired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst. 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	e derivative		vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Evalenation					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	ber					

1. Amounts shown represent units of phantom stock acquired under the Company's outside director deferred compensation plan in lieu of cash director fees. Each unit of phantom stock represents the right to receive one share of the Issuer's common stock upon settlement.

Remarks:

/s/ Jill Eaton, by power of attorney

04/03/2024

** 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.