FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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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 CAESARS ENTERTAINMENT Corp [CZR]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
FRISSORA MARK P														1	X	X Director		10% Owner		Owner		
(Last)	(Fi	rst) (Middle)		- 1										X	Offic belov	er (give title w)		Other below	(specify		
C/O CAESARS ENTERTAINMENT CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 04/02/2018										President and CEO						
l .		LACE DRIVE																				
, ONE CA	Lorino 171	LITCL DIGVE			4. If	Ame	endment	, Date o	f Origina	l Filed	(Month/Da	ay/Yea	ar)		6. Individual or Joint/Group Filing (Check Applicable							
(Street)														اٰ	ine) X	Forn	n filed by One	e Renortir	a Pers	son		
LAS VE	GAS N	V 8	39109		_										X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate) (Zip)																			
		Tabl	le I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, oı	Ben	efici	ally	Owne	ed					
Da			Date	ate //onth/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)		ies Acquired (A) or Of (D) (Instr. 3, 4 an				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	ınt (A) or (D)		Pric	:e	Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common Stock				04/02	04/02/2018				A		324,075	5(1)	A	\$0		2,177,930(2)		D				
Common Stock																422,925(3)		D				
Common Stock														1,900(4)		I		by daughter				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	Derivative Security (Instr. 3)			ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		ount nber	ıt r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Form Direc or In (I) (Ir		11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Explanation of Responses:

- 1. Represents Restricted Stock Units ("RSUs") granted on April 2, 2018 and which vest in one-third equal annual installments on each of April 2, 2019, April 2, 2020, and April 2, 2021.
- 2. Includes shares of Common Stock beneficially owned and unvested RSUs previously granted and reported.
- 3. Represents shares held in a trust.
- 4. The reporting person disclaims beneficial ownership of these securities, and this report shall 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.

Remarks:

/s/ Jill Eaton, by Power of 04/04/2018 Attorney, on behalf of Mark P. Frissora

** 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.