FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

gton, D.C. 20549	Г
	Ш

washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	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

Name and Address of Reporting Person* Pegram Michael E						Issuer Name and Ticker or Trading Symbol Caesars Entertainment, Inc. [CZR]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 03/06/2024										Officer (give title Other below) below			ner (sp ow)	ecify	
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)	\ T															filed by					
RENO	N\	NV 89501				Form filed by More than One Reporting Person													ung		
(City) (State) (Zip)				Ru	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 intend satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											intend	led to									
		Table	I -	Non-Deriva	tive	Secu	rities	Acc	quir	red, D	ispos	ed o	f, or	Benefici	ally Own	ed					
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)				5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership			
								C	ode	v	Amoun		(A) or (D)	Price	Reported (Instr. Transaction(s) (Instr. 3 and 4)		(instr. 2	4) (Instr. 4)			
Common Stock 03				03/06/202	4				P		15,00	00	A	\$41.45(1)	151,697		I		By AMT Investments LLC ⁽²⁾		
Common Stock														5,00	00]		By P LLC	Pea Peg		
Common	Stock														4,612		D				
		Tal	ble	II - Derivati (e.g., pเ										eneficial ecurities		d					
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise (Month/Day/Year) 3. Transaction Date Execution Date, if any (Month/Day/Year)					Transaction of Code (Instr. Derivati		rative rities ired r osed)	Exp	piration	xercisable and n Date ay/Year)		Amo Secu Unde Deri	tle and unt of urities erlying vative urity (Instr. d 4)	8. Price of Derivative Security (Instr. 5)	9. Num derivati Securit Benefic Owned Followi Reporte Transac (Instr. 4	ive ies cially ing ed ction(s)	e Owner Form: Direct or Indi (I) (Inst		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Dat Exc	te ercisab		ration	Title	Amount or Number of Shares									

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$40.99 to \$41.93, inclusive. The reporting person undertakes to provide to the Registrant, any security holder of the Registrant, or the staff of the SEC, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in footnote 1 to this Form 4.
- 2. The reporting person disclaims beneficial ownership of the securities, except to the extent of a pecuniary interest therein.

Remarks:

/s/ Jill Eaton, by power of 03/07/2024 attorney

** 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.