FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL

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* <u>Lepori Stephanie</u>				2. Issuer Name and Ticker or Trading Symbol Eldorado Resorts, Inc. [ERI]								Check all a		ng Person(s) to I	Ssuer	
(Last) (First) (Middle) 100 WEST LIBERTY STREET 11TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 11/12/2019								A bel	cer (give title ow) hief Admin	Other below istrative Office	,	
(Street) RENO (City)	N [*]		39501 Zip)		4. If An	nendment, Date	of Origin	al Filed	l (Month/	Day/\	⁄ear)		ine) X Fo Fo	m filed by On	p Filing (Check / e Reporting Per re than One Rep	son
		Tabl	e I - Nor	n-Deriv	ative S	ecurities Ac	quired	l, Dis	posed	of,	or Ben	efici	ally Owi	ned		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				2A. Deemed Execution Date, if any (Month/Day/Yea	Code (Instr.						nd Seci Ben Owr	nount of irities eficially ed Following orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	. v	Amoun	t	(A) or (D)	Price	Tran	saction(s) r. 3 and 4)		(111341.4)
Common Stock 11/12/2				/2019		S		5,00	00	D	\$51	551.32 17,599		D		
		Та				urities Acqu ls, warrants,								d		
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Month/Day/Year) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		Date,	4. Transacti Code (Ins 8)				е	nnd 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Date Exercisable Expiration

Date

Explanation of Responses:

Remarks:

/s/ Anthony L. Carano, by power of attorney

Amount or Number

of Shares

Title

** Signature of Reporting Person Date

11/12/2019

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

- * 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).

Code

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.

(A) (D)