FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIA	L OWNERSHIP

OMB APPROVAL									
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* Carano Gary L. (Last) (First) (Middle)					<u>Ca</u>	2. Issuer Name and Ticker or Trading Symbol Caesars Entertainment, Inc. [CZR] 3. Date of Earliest Transaction (Month/Day/Year)									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title below) Other (specify below)					
100 WEST LIBERTY STREET 12TH FLOOR			01/	01/25/2022									Exec. Chairman of the Board							
(Street) RENO NV 89501			4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(St	ate)	(Zip)												Person					
		Tab	le I - No	n-Deriv	/ative	e Se	curit	ies Acc	quired	, Dis	sposed o	f, or Be	nefi	cially	/ Owned					
Date			2. Transa Date (Month/D		Execution Date,		on Date,	Code (Instr.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a 5)				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	(A) or (D)	Pric	e	Transaction(s) (Instr. 3 and 4)				(1130.4)		
Common Stock 01/			01/25	/2022	2022			M		31,121	A	,	\$ <mark>0</mark>	217,0)27		D			
Common Stock			01/25	/2022				F		10,722	D	\$7	7.29	206,3	305		D			
Common Stock													8,604,325		I		See Footnote ⁽¹⁾			
Common Stock										40,000		I		By Spouse						
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)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Execution if any (Month/Da	Date, Transa Code (n of		6. Date Exercis Expiration Dat (Month/Day/Ye		te	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac (Instr. 4)	ve Owners es Form: ally Direct (I or Indirect (I) (Instrict tion(s)		Beneficial Ownership tt (Instr. 4)	
					Code	v	(A)		Date Exercisa	ıble	Expiration Date	Title	Amo or Num of Sha	nber						
Restricted Stock Unit	(2)	01/25/2022			M	31,121		31,121	(3)		(3)	Common Stock 31,1		121	\$0	0		D		

Explanation of Responses:

- 1. These shares are owned directly by Recreational Enterprises, Inc. (REI). The reporting person has a direct ownership interest in REI and an indirect ownership interest in REI through the Gary L. Carano S Corporation Trust ("S Corporation Trust") and the Gary L. Carano Qualified S Corporation Trust. 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 the securities for purposes of Section 16 or for any other purpose.
- 2. Restricted stock units convert into common stock on a one-for-one basis.
- 3. The restricted stock units were granted on January 25, 2019 pursuant to the 2015 Equity Incentive Plan and vested on January 25, 2022.

Remarks:

/s/ Jill Eaton by power of attorney

01/27/2022

** 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.