FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 20549
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STATEMENT (OF CHAN	GES IN	BENEFICIAL	. OWNERSHIP)

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

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* Pegram Michael E				2. 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)			Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/26/2024								0		r (give title			1
100 WEST LIBERTY STREET 12TH FLOOR				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	N	V 8	39501											F		led by One I led by More		J	- 1
(City)	(Si	rate) (Zip)		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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Dat			2. Transa Date (Month/D	/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Ir	Transaction Dispose Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 an		Benefici Owned F		es Formially (D) (Following (I) (II)		Direct c ndirect E r. 4)	. Nature of Indirect Beneficial Ownership	
					Code V Amount (A) or (D)			r Price	Tra	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)		ate,	i. 5. Num Code (Instr. 5) Securit Acquir (A) or Dispos of (D) (Instr. 5 and 5)		tive ties red	Expiration I	s. Date Exercisable and expiration Date Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		Deriva Securi	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	, D	0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable	E	xpiration ate	Title	Amount or Number of Shares						
Restricted Stock Unit	(1)	01/26/2024			A		5,469		(2)		(2)	Common Stock	5,469	\$0		5,469		D	

Explanation of Responses:

- 1. Restricted stock units convert into common stock on a one-for-one basis.
- 2. Fully vested restricted stock units were granted on January 26, 2024 pursuant to the Amended and Restated 2015 Equity Incentive Plan. The reporting person has elected to defer receipt of these shares until his separation from service on the board of directors under the Issuer's outside director deferred compensation plan. The restricted stock units do not expire.

Remarks:

/s/ Jill Eaton, by power of attorney

01/29/2024

** 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.