FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	OMB Number: 3235-0104						
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* PENN NATIONAL GAMING INC	2. Date of Event Requiring Stater (Month/Day/Year 10/09/2013	Statement Address And Statement Gaming & Leisure Properties, Inc. [ GLPI ]						
(Last) (First) (Middle) 825 BERKSHIRE BLVD, SUITE 200	10/03/2013		Relationship of Reporting Person(s) to Issue (Check all applicable)  Director X 10% Own		(Mo	5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) WYOMISSING PA 19610 (City) (State) (Zip)			Officer (give title below)	Other (spe below)	App	licable Line)  C Form filed b	t/Group Filing (Check y One Reporting Person y More than One erson	
	Table I - Nor	-Derivati	ve Securities Beneficially	y Owned				
1. Title of Security (Instr. 4)		eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock, par value \$0.01		1,000(1)	I		Through a wholly-owned subsidiary			
(6			Securities Beneficially ( nts, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securit Underlying Derivative Securit		4. Conversion or Exercise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date	Expiration		Amount or Number of	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)		

## **Explanation of Responses:**

 $1.\ Penn\ National\ Gaming,\ Inc.\ owns\ 100\%\ of\ the\ outstanding\ common\ stock\ of\ Gaming\ and\ Leisure\ Properties,\ Inc.\ through\ CRC\ Holdings,\ Inc.,\ its\ wholly-owned\ subsidiary.$ 

<u>/Robert S. Ippolito/</u> <u>VP/Sec/Treasurer</u>

<u>10/09/2013</u>

\*\* 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 5 (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.