Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

					or Sec	tion 30(h	h) of the In	vestmer	nt Con	npany Act of	f 1940						
1. Name and Address of Reporting Person* <u>Urdang E Scott</u>				2. Issuer Name and Ticker or Trading Symbol Gaming & Leisure Properties, Inc. [GLPI]							5. Relationship of Report (Check all applicable) X Director			ing Person(s) to Issu			
(Last)	(Fi	rst) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024								Officer (give title below)		Other (s	specify
845 BERKSHIRE BLVD. SUITE 200				4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) WYOMISSING PA 19610												filed by Mo	led by More than One Repo				
(City)			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 - No	n-Deriva	tive S	ecuriti	ies Acq	uired,	Disp	osed of	or Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		3. 4. Securitie Disposed (5) 5)		ies Acquired (A) Of (D) (Instr. 3,		nd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 03/01				03/01/	2024			P		2,500	A	\$450	1) 15	156,685		D	
Common Stock										5,605(2)		605(2)	I		By Trusts		
		Та								sed of, o				d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, (Day/Year)	n Date, Transac		f	6. Date Exercisable at Expiration Date (Month/Day/Year)			7. Title an Amount of Securities Underlyin Derivative Security (3 and 4)	of s ng	8. Price of Derivative Security (Instr. 5)	rative derivative rity Securities		10. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

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 \$44.81 to \$45.15 inclusive. The reporting person undertakes to provide Gaming and Leisure Properties, Inc., any security holder of Gaming and Leisure Properties, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the ranges set forth in the footnote to this Form 4.

(D)

(A)

Date

Exercisable

2. Represents shares held in two trusts for the benefit of members of the reporting person's immediate family. The reporting person is the trustee of one trust and the reporting person's spouse is the trustee of the other trust

Remarks:

/s/E. Scott Urdang

Title

Expiration

Date

03/04/2024

** Signature of Reporting Person Date

Amount Number

Shares

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.