Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting I	ssuer			
1 Issuer's name				2 Issuer's employer identification number (EIN)
GAMING AND LEISURE PR		46-2116489		
3 Name of contact for add	ditional information	4 Telephon	e No. of contact	5 Email address of contact
DESIREE BURKE		610-401-2903	DBURKE@GLPROPINC.COM	
6 Number and street (or P	O. box if mail is not			
845 BERKSHIRE BLVD.		WYOMISSING, PA 19610		
8 Date of action		9 Class	sification and description	
03/23/18, 06/29/18, 09/21/18	2 12/28/18	COMMO	N STOCK	
10 CUSIP number	11 Serial number(12 Ticker symbol	13 Account number(s)
	,	,	,	
36467J108			GLPI	
				See back of form for additional questions.
_				date against which shareholders' ownership is measured for
				TRIBUTIONS TO ITS COMMON SHAREHOLDERS ON
		R 21, 2018, A	ND DECEMBER 28, 2018	B. A PORTION OF THE DISTRIBUTIONS REPRESENT A
NONTAXABLE RETURN O	F CAPITAL.			
15 Describe the quantitat	ive effect of the orga	anizational act	tion on the basis of the se	curity in the hands of a U.S. taxpayer as an adjustment per
				LD BE REDUCED BY \$0.051091 PER SHARE OF COMMON
				JUNE 29, 2018; BY \$0.051091 PER SHARE OF COMMON
				STOCK ON DECEMBER 28, 2018.
	•		• • •	lculation, such as the market values of securities and the
				BUTIONS ASSOCIATED WITH THE 2018 TAX YEAR WHICH
ARE IN EXCESS OF THE C	URRENT YEAR AN	ID ACCUMUL	ATED EARNINGS & PRO	OFITS.

Part	Ш	Organizational Action (continued))				
17	List the	applicable Internal Revenue Code section	n(s) and subsection(s) upon which the tax t	reatmen	t is based I	•	
I.R.C.	SECTI	ON 301(c)(2)					
18 (Can an	y resulting loss be recognized? ► N/A					
19	Provide	any other information necessary to imple	ment the adjustment, such as the reportab	ole tax ye	ear ► <u>N/A</u>		
-							
	Unde	er penalties of perjury, I declare that I have exa	mined this return, including accompanying sche	dules and	d statements	, and to the best o	of my knowledge and
	belie	f, it is true, correct, and complete. Declaration o	f preparer (other than officer) is based on all info	rmation o	f which prep	arer has any knowl	edge.
Sign							
Here	Sign	ature ▶		Date ►			
	Print	your name ► DESIREE BURKE	I=	Title►	SVP & CI	HIEF ACCOUNT	
Paid		Print/Type preparer's name	Preparer's signature	Date	10015	Check III	PTIN
Prep		MAX E. GEORGE		1/31	/2019	self-employed	P01284523
Use		Firm's name ► KPMG LLP				Firm's EIN ▶	13-5565207
		Firm's address ► 1601 MARKET STREE				•	267-256-7000
Send F	orm 8	937 (including accompanying statements)	to: Department of the Treasury, Internal Re	evenue S	Service, Og	den, UT 84201-0	054