FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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* Epps JoAnne A.	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 09/24/2021 3. Issuer Name and Ticker or Trading Symbol Gaming & Leisure Properties, Inc. [GLPI]						
(Last) (First) (Middle) 845 BERKSHIRE BLVD.			Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date of Original Filed (Month/Day/Year)		
SUITE 200	-		X Director Officer (give title below)	10% C Other below)	(specify		eck Applicable Form filed	oint/Group Filing e Line) by One Reporting
(Street) WYOMISSING PA 19610			Director	r			Person	by More than One Person
(City) (State) (Zip)								
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)						4. Nature of Indirect Beneficial Ownership (Instr. 5)		
1. Title of Security (Instr. 4)		E	2. Amount of Securities Beneficially Owned (Instr. I)	Form: [(D) or li	Direct ndirect			
Title of Security (Instr. 4) Common Stock		E	Beneficially Owned (Instr.	Form: [(D) or li	Direct ndirect r. 5)			
Common Stock		erivative	Beneficially Owned (Instr. I)	Form: I (D) or li (I) (Inst	Direct ndirect r. 5)	Own		
Common Stock		erivative s, warran	Seneficially Owned (Instr.) 0 Securities Beneficia	Form: I (D) or II (I) (Institute I) (I) (Institute I) (I) (Institute I) (I) (Institute I) (I) (I) (I) (I) (I) (I) (I) (I) (I)	Direct ndirect r. 5)	Sion		

Explanation of Responses:

Remarks:

/s/JoAnne Epps

10/05/2021

** Signature of Reporting

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.