FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

## 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

1. Name and Address of Reporting Person* <u>Tirpak Bradley M</u>			2. Date of Event Requiring Stater (Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL]					
(Last)	(First) (Middle)		11/28/2014		Relationship of Reporting Pers (Check all applicable)     X Director		on(s) to Issu	(Mo	5. If Amendment, Date of Original Filed Month/Day/Year) .2/08/2014	
C/O FULL HOUSE RESORTS, INC. 4670 SOUTH FORT APACHE, SUITE 190  (Street)		· ·				Officer (give title below)	Other (spe	Ap	Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     Form filed by More than One Reporting Person	
LAS VEGAS	NV	89147								
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)						ally Owned (Instr. 4)	1		Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock						464,082(1)	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)			ite	3. Title and Amount of Secur Underlying Derivative Secur 4)			4. Conversion or	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiratior Date	Title	,	Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	

## **Explanation of Responses:**

1. A total of 100 shares were omitted form the reporting person's original Form 3, and also were omitted from eight Forms 4 filed by the reporting person after his original Form 3 was filed.

## Remarks:

/s/ Lewis Fanger, Attorney-in-04/07/2017

\*\* 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.