FORM 4	4
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Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

(Print or Type Perponses)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN 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

(Print or Type Responses)											
1. Name and Address of Reporting Person [*] Paulson Vikki			2. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL]							cable) 10% Owner	
1602 BRUMBACK S	(First) STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/23/2010				Officer (give title below)	Other (specify b	below)		
(Street) BOISE, ID 83702			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X_Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	T	able I - No	n-De	erivative S	ecurit	ies Acqui	red, Disposed of, or Beneficially	Owned	
(Instr. 3)			2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
			(Month/Day/Year)	Code	v	Amount	(A) or nount (D) Price		(instr. 5 and 4)	or Indirect (I) (Instr. 4)	*
Common Stock		04/23/2010		S		19,500	D	\$ 3.2366	3,152,300	I	By Allen E. Paulson Living Trust (1)
Common Stock		04/26/2010		S		3,000	D	\$ 3.2033	3,149,300	I	By Allen E. Paulson Living Trust (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Numb	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)]	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				4	Acqui	ired			4)			Following	Direct (D)	
					((A) 01	ſ						Reported	or Indirect	
]	Dispo	sed						Transaction(s)	(I)	
						of (D))						(Instr. 4)	(Instr. 4)	
					((Instr.	3,								
					4	4, and	15)								
											Amount				
								Data	Emination		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code V	V	(A)	(D)				Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address		10% Owner	Officer	Other		
Paulson Vikki 1602 BRUMBACK STREET BOISE, ID 83702		Х				

Paulson James D. 22560 LAQUILLA DRIVE CHATSWORTH, CA 91311	Х	
ALLEN E PAULSON LIVING TRUST 10636 SCRIPPS SUMMIT COURT, SUITE 125 SAN DIEGO, CA 92131	Х	

Signatures

/s/ Vikki Paulson	04/26/2010
**Signature of Reporting Person	Date
/s/ James D. Paulson	04/26/2010
**Signature of Reporting Person	Date
/s/ Vikki Paulson and James D. Paulson, Co-Trustees	04/26/2010
	Date

Explanation of Responses:

- * 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).
- (1) These shares are owned directly by the Allen E. Paulson Living Trust and indirectly by Vikki Paulson and James D. Paulson as co-trustees of the trust.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.