### FORM 4

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

OMB APPE	ROVAL
OMB Number:	3235-0287
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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).

#### 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 Ty	pe Response	s)																
1. Name and Address of Reporting Person *- adams kenneth robert				2. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) (Middle) C/O FULL HOUSE RESORTS, INC., 1980 FESTIVAL PLAZA DRIVE, SUITE 680				3. Date of Earliest Transaction (Month/Day/Year) 05/17/2019								-	Office	er (give	e title below)	Oth	er (specify belo	w)
(Street) LAS VEGAS, NV 89135				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)  X. Form filed by One Reporting Person  Form filed by More than One Reporting Person							
(Cit	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye			2A. Deemed Execution D any (Month/Day		Date, if	(Instr. 8)		(A) or Disposed		sposed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		ed	Form:	7. Nature of Indirect Beneficial		
					y/Year)	C	ode	V A	mount	(A) or (D)	Price	(Instr. 3 and 4)				Ownership (Instr. 4)		
Common	Stock		05/17/2019					A	5	,381	A	\$0	92,435				D	
			Table II -	(e.g., pu	ts, ca	alls, wa	rran	quired, ts, optio	Dispo	sed of,	or Benef le securi	ficially (			1			
	Derivative Conversion Date Execution Date, if Transaction of Code Derivative (Month/Day/Year)		6. Date Expirat	Expiration Date of Und (Month/Day/Year) Securit				Citle and Amount 8. Underlying Descrities Section 2.			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	(Instr. 4)					
				Code	v	(A)	(D)	Date Exercis	sable	Expira Date	ation	Title	or	ount nber res				
Stock Option (Right to Buy)	\$ 2.23	05/17/2019		A		8,650		05/17	/2020	05/17	7/2029	Comn	1.8.6	650	\$ 0	8,650	D	

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
adams kenneth robert C/O FULL HOUSE RESORTS, INC. 1980 FESTIVAL PLAZA DRIVE, SUITE 680 LAS VEGAS, NV 89135	X						

#### **Signatures**

/s/ Lewis A. Fanger, Attorney-in-Fact	05/21/2019
**Signature of Reporting Person	Date

## **Explanation of Responses:**

 $\star$  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).

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.