FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB	APP	RO\	/AI

	OMB Number:	3235-0287
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1	hours per response:	0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Name and Address of Reporting Person*     Fanger Lewis A.			2. Issuer Name <b>and</b> Ticker or Trading Symbol  FULL HOUSE RESORTS INC [ FLL ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
I		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/24/2025	X	Officer (give title below)  Sr. VP, CFO and Tri	Other (specify below)		
1980 FESTIVAL P (Street) LAS VEGAS	LAZA DRIVE, SU	89135	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	idual or Joint/Group Filing (Ch Form filed by One Reportin Form filed by More than On	g Person		
(City)	(State)	(Zip)						

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Of (D) (		4. Securities Ad Of (D) (Instr. 3,		) or Disposed	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)
Common Stock	01/24/2025		M <sup>(1)</sup>		104,992	A	\$1.37	359,650	D	
Common Stock	01/24/2025		<b>S</b> <sup>(1)</sup>		104,992	D	\$4.6246(2)	254,658	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (In 8)		Derivative Expiration Date Securities (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$1.37	01/24/2025		M <sup>(1)</sup>			104,992	(3)	01/30/2025	Common Stock	104,992	\$0	90,524	D	

#### Explanation of Responses:

- 1. The exercises and sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on August 22, 2024.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$4.405 to \$4.78, inclusive. The reporting person undertakes to provide to Full House Resorts, Inc., any stockholder of Full House Resorts, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 3. The stock option fully vested on January 30, 2019.

<u>/s/ Lewis A. Fanger</u> <u>01/28/2025</u>

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.

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.