FORM 4

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

OMB APPROVAL
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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

	pe Responses	·/															
1. Name and Address of Reporting Person* IACOCCA LEE					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 4670 SOUTH FORT APACHE ROAD, SUITE 190				3. Date of Earliest Transaction (Month/Day/Year) 09/24/2012						•	Office	r (give title belo	ow)	Other (specify b	elow)		
I AC VE	CAC NIV	(Street)			4. If	Amendm	ent,	Date C	riginal	l Filed(Mont	h/Day/Year)		X_Form fil	ed by One Repo		(Check Applicate	le Line)
	LAS VEGAS, NV 89147 (City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)		Date (Month/Day/Year)		Execut			(Instr. 8)		or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)		Ownership Form:	Beneficial		
					(Mont	h/Day/Ye	ar)	Code		Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	1		09/24	/2012				S		180,000	$D = \begin{bmatrix} \$ \\ 3 \end{bmatrix}$.4025	700,47	1		D	
Reminder:	Report on a s	separate line	for each	class of secu	ırities l	peneficial	y ov	wned d				nd to tl	ne collec	ction of inf	ormation	SEC	1474 (9-02)
Reminder:	Report on a s	separate line	for each		· Deriv	ative Sec	uriti	ies Acc	Pe co th uired,	ersons whontained in e form dis	no respon n this for splays a of, or Ben	m are curren eficially	not requ tly valid		ormation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security	•	3. Transacti Date (Month/Day	on	Table II - 3A. Deemed Execution D	Deriv (e.g., j	ative Secouts, calls 4. Transact	uriti	ies Acc arrants	th per continue de	ersons whontained i e form dis	no respon n this for splays a of, or Ben tible secur cisable on Date	eficially rities) 7. Tit Amore Unde	not requ tly valid y Owned le and ant of rlying	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
IACOCCA LEE C/O 4670 SOUTH FORT APACHE ROAD SUITE 190 LAS VEGAS, NV 89147	X					

Signatures

/s/ Virginia King, by power of attorney	09/26/2012
**Signature of Reporting Person	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)

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.

The undersigned hereby appoints, authorizes and designates Virginia King as his true and lawful attorney-in-fact (the "Attorney-in-Fact") to:

- 1. Prepare and sign any applicable Form 3, Initial Statement of Beneficial Ownership ("Form 3"), Form 4, Statement of Changes of Beneficial Ownership of Securities ("Form 4"), any applicable Form 5, Annual Statement of Beneficial Ownership of Securities ("Form 5"), and any amendment thereto, with respect to the undersigned's ownership of common stock of Full House Resorts, Inc. (the "Company");
- 2. Do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable in connection with the filing of any Form 3, Form 4, Form 5 and any amendment thereto, if necessary, with the United States Securities and Exchange Commission; and
- 3. Take any other action of any type whatsoever in connection with the foregoing which, in the opinion of the Attorney-in-Fact, may be of benefit to, in the best interest of, or legally required by, the undersigned in connection with the filing of any Form 3, Form 4, Form 5 and any amendment thereto, if necessary, it being understood that the documents executed by the Attorney-in-Fact on behalf of the undersigned pursuant to this power of attorney shall be in such form and shall contain such terms and conditions as the Attorney-in-Fact may approve in the Attorney-in-Fact's discretion.

The undersigned hereby grants to the Attorney-in-Fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation for and in the name, place and stead of the undersigned, hereby ratifying and confirming all that the Attorney-in-Fact, or such Attorney-in-Fact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

The undersigned hereby acknowledges that (1) this power of attorney does not relieve the undersigned from responsibility for compliance with the undersigned's obligations under Section 16 of the Securities Exchange Act of 1934 (the "Exchange Act"), including, without, limitation, the reporting requirements under Section 16(a) of the Exchange Act and (2) neither the Company nor the Attorney-in-Fact assumes any liability for the undersigned's responsibility to comply with the requirements of Section 16 of the Exchange Act, any liability of the undersigned for any failure to comply with such requirements, or any liability of the undersigned for disgorgement of profits under Section 16(b) of the Exchange Act.

This power of attorney shall remain in full force and effect until the undersigned is no longer required to file any Form 3, Form 4, Form 5 or any amendment thereto, unless earlier revoked by the undersigned in a signed writing delivered to the Attorney-in-Fact. The undersigned hereby revokes any and all powers of attorney previously executed as of an earlier date for the same or similar purpose.

IN WITNESS WHEREOF, the undersigned has caused this power of attorney to be executed as of this 23rd day of June 2010.

Signature

/s/ Lee Iacocca

Print Name

ACKNOWLEDGMENT ATTACHED TO POWER OF ATTORNEY SIGNED BY LIDO A. IACOCCA

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STATE OF CALIFORNIA )
COUNTY OF LOS ANGELES )
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On June 23, 2010, before me, Lisa J. Pickle, a Notary Public, personally appeared LIDO A. IACOCCA, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

/s/ Lisa J. Pickle

Signature

Lisa J. Pickle Commission # 1699879 Notary Public - California Los Angeles County My Comm. Expires Oct 20, 2010