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

Responses	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. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director 10% Owner				
(Last) (First) (Middle) C/O FULL HOUSE RESORTS, INC., 4670 SOUTH FORT APACHE ROAD, SUITE 190			3. Date of Earliest Transaction (Month/Day/Year) 05/15/2013						Office	er (give title belo	ow)	Other (specify be	llow)
(Street) LAS VEGAS, NV 89147			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					
	(State)	(Zip)	Table I - Non-Derivative Securities Acqu				Acqui	red, Disp	osed of, or l	Beneficially (Owned		
1.Title of Security (Instr. 3)		Date	any	f Code (Instr. 8)		(A) or	1		Beneficia Reported	ally Owned Following Transaction(s)		Form: Direct (D)	Beneficial Ownership
							. ,	Price	• • • • • •			` ′	
					tl uired	contained he form d	in this for isplays a	rm are curren	not requ ntly valid	uired to res	spond unle	ss	(> \2)
r Exercise Price of		ition 3A. Deemed Execution Dar ay/Year) any	4. Transaction Code	5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ti Amo Undo Secu	ount of erlying	Derivative Security (Instr. 5)		Ownersh Form of Derivativ Security:	Beneficial Ownershi (Instr. 4)
Derivative Security				(A) or Dispos of (D) (Instr.	ed 3, 5)			4)	Amount		Reported Transaction	Direct (I or Indire (I) (Instr. 4)	(Instr. 4)
	HOUSE ORT APA AS, NV 8 Furity Stock Conversion or Exercise rice of	AS, NV 89147 (State) Stock 3. Transaction Date (Month/Day/Yerrice of	AS, NV 89147 (State) 2. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. 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Date of Earliest Transaction (Month/Day/Year) 05/15/2013 AS, NV 89147 (State) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (A) or Disposed (Instr. 8) (A) or (A) or (D) Persons who respon contained in this for the form displays a Table II - Derivative Securities Acquired, Disposed of, or Ben (e.g., puts, calls, warrants, options, convertible secu (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if Code (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date, if Code (Gh) or indirectly. Persons who respon contained in this for the form displays a Table II - Derivative Securities Acquired, Disposed of, or Ben (e.g., puts, calls, warrants, options, convertible secu (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 4. 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Table II - Derivative Securities Acquired, Disposed of, or Beneficially owned directly or indirectly. Table II - Derivative Securities Acquired, Disposed of, or Beneficially owned directly or indirectly. Table II - Derivative Securities Acquired, Disposed of, or Beneficially owned directly or indirectly. Persons who respond to a contained in this form are the form displays a current or Exercise (Month/Day/Year) 3. 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Reporting Owners

	Relationships				
Reporting Owner Name / Address		10% Owner	Officer	Other	
adams kenneth robert C/O FULL HOUSE RESORTS, INC. 4670 SOUTH FORT APACHE ROAD, SUITE 190 LAS VEGAS, NV 89147	X				

Signatures

/s/ Kenneth Robert Adams	05/15/2013	
**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.

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