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

(Print or Ty	pe Response	s)																		
Name and Address of Reporting Person* Tirpak Bradley M				2. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL]							_X_ I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner								
(Last) (First) (Middle) C/O FULL HOUSE RESORTS, INC., 4670 SOUTH FORT APACHE, SUITE 190				3. Date of Earliest Transaction (Month/Day/Year) 05/05/2015								fficer	(give title belo	ow)	Other	r (specify belo	ow)			
LAS VE	GAS, NV	(Street) 89147			4. If	Amendn	nent,	, Date	Origii	nal Fi	led(Mont	h/Day/Year))	_X_ For	m file	al or Joint/O ed by One Repo d by More than	orting Person		**	Line)
(City)	(State)		(Zip)			Т	able I	- Non	-Der	ivative	Securitie	s Acq	quired, D	ispo	sed of, or I	Beneficially	Ow	ned	
(Instr. 3)			Date	ransaction nth/Day/Year)	Exec any	A. Deemed xecution Date, if ny Month/Day/Year		(Instr. 8)		v	(A) or Disposed of (Instr. 3, 4 and 5)		of (E	of (D) Beneficia		nt of Securities ally Owned Following I Transaction(s) and 4)		Ownership of Form:		eneficial wnership
Common Stock 05/05/2015			05/2015				A		13,24	5 A	\$ 0	492,2	227			D				
				Table II - I					cquire	cont the f ed, Di	ained i orm di	n this fo splays a of, or Be	orm a curi	re not r rently va ially Ow	equ alid	tion of inf ired to res OMB cont	spond unle		SEC 14	74 (9-02)
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Year) Exe	3A. Deemed Execution Date, i	te, if	4. Transaction Code		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. An Un Se (In	7. Title and Amount of Underlying Securities (Instr. 3 an 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	y n(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	(Instr. 4)	
						Code	V	(A)	(D)	Date Exer		Expiration Date	On Ti	or Num of Share						
Renor	ting ()	wnore																		

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Tirpak Bradley M C/O FULL HOUSE RESORTS, INC. 4670 SOUTH FORT APACHE, SUITE 190 LAS VEGAS, NV 89147	X							

Signatures

/s/ Lewis A. Fanger, attorney-in-fact	05/06/2015			
**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.