FORM	4
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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).

(D) '

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

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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

(Find of Type Responses)												
1. Name and Address of Reporting Person [*] Tirpak Bradley M		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) C/O FULL HOUSE RESORTS, INC. SOUTH FORT APACHE, SUITE 19	, 4670 0	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2016						Officer (give title below)Ot	her (specify belo	w)		
(Street) LAS VEGAS, NV 89147	4	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				
(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)	Execution Date, if any	3. Transact Code (Instr. 8)	ion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Indir Form: Benefic	Beneficial		
		(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
Common Stock	05/10/2016		А		7,059	A	\$0	543,786	D			

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

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	er	6. Date Exerci	sable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of Deriva	vative Expiration Date		of Underlying De		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		Securitie	s	(Month/Day/Year)		Securities S		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Acquired	(A)		(Instr. 3 and 4) (Instr. 3		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					or Dispos	sed	1						2	(Instr. 4)
	Security					of (D)							0	Direct (D)	
						(Instr. 3,	4,						1	or Indirect	
						and 5)							Transaction(s)	1 / J	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration		or				
								Exercisable	Date	Title	Number				
				C 1	x 7						of				
				Code	V	(A)	(D)				Shares				
Stock															
Option	• 1 -	05/10/0016				10 500		0.5/1.0/2015	0.5.11.0.10.00.0	Common	10 500	^	10.500	P	
(right to	\$ 1.7	05/10/2016		Α		10,588		05/10/2017	05/10/2026	Stock	10,588	\$ 0	10,588	D	
										Stock					
buy)													1		

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	Х						

Signatures

/s/ Lewis Fanger, Attorney-in-Fact	05/12/2016
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.