### FORM 4

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

OWR APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
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 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	3)													
1. Name and Address of Reporting Person* THOMAS CRAIG W  (Last) (First) (Middle) C/O FULL HOUSE RESORTS, INC., 1980 FESTIVAL PLAZA DR., SUITE 680  (Street)  LAS VEGAS, NV 89135			2. Issuer Name and Ticker or Trading Symbol FULL HOUSE RESORTS INC [FLL]      3. Date of Earliest Transaction (Month/Day/Year)     05/23/2018      4. If Amendment, Date Original Filed(Month/Day/Year)						:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
									-	Officer (give	e title below)	Oth	er (specify below	v)	
									6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				e)		
(Cit		(State)	(Zip)			Table	e I - Non-De	rivative	Securitie	s Acquii	red, Disposed	of, or Bene	ficially Own	ed	
1.Title of S (Instr. 3)						(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Owned Following Rep Transaction(s)			Ownership Form:	7. Nature of Indirect Beneficial
				(Month	n/Day/Year		Code V	Amour	(A) or (D)	Price	(I)		or Indirect	Ownership (Instr. 4)	
Common	n Stock		05/23/2018				A	3,582	A	\$0	672,454			D	
Reminder:	Report on a s	separate line for each	n class of securities b	peneficia	lly owned	lirectly	Pers in thi	ns who	are not re	equired	collection of to respond	unless the		ed SEC	474 (9-02)
Reminder:	Report on a s	separate line for each	class of securities b	peneficial	lly owned	lirectly	Pers in thi	ns who	are not re	equired	to respond	unless the		ed SEC	474 (9-02)
1. Title of Derivative Security (Instr. 3)	2.	3. Transaction	Table II -  3A. Deemed Execution Date, if	Derivat (e.g., pu 4. Transac Code	ive Securits, calls, w  5. Nu tion of Deriv ) Secur Acqu (A) or	ies Acarran	Pers in thi	posed of converting	are not re urrently v f, or Bene ble securi	ficially (ities)  7. Title of Under Securit	to respond MB control r  Owned  and Amount erlying	unless the number.	9. Number of Derivative Securities Beneficially Owned Following	f 10. Ownersh Form of Derivati' Security Direct (I	11. Natu of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II -  3A. Deemed Execution Date, if any	Derivat (e.g., pu 4. Transac Code	ive Securits, calls, w 5. Nu tion of Deriv Secur Acqu	mber ative ities red sed 3, 4,	Persin thidisple cquired, Diets, options, 6. Date Exexpiration	posed of converting	are not re urrently v f, or Bene ble securi	ficially (ities)  7. Title of Under Securit	to respond MB control r  Owned  and Amount erlying ies	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Natu of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II -  3A. Deemed Execution Date, if any	Derivat (e.g., pu 4. Transac Code	ive Securits, calls, w 5. Nu tion of Deriv ) Secur Acqu (A) or Dispector (Instr	mber ative ities red sed 3, 4,	Persin thidispleading of the displeading of the displace of the displeading of the displace of the d	posed of converting the converting the converting the	are not re urrently v f, or Bene ble securi and	ficially (ities)  7. Title of Under Securit	to respond MB control r  Owned  and Amount erlying ies	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	f 10. Ownersh Form of Derivati Security Direct (I or Indire s) (I)	11. Natu of Indire Benefici Ownersh (Instr. 4)

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
THOMAS CRAIG W C/O FULL HOUSE RESORTS, INC. 1980 FESTIVAL PLAZA DR., SUITE 680 LAS VEGAS, NV 89135	X				

#### **Signatures**

/s/ Lewis A. Fanger, Attorney-in-Fact	05/25/2018
**Signature of Reporting Person	Date

## **Explanation of Responses:**

 $\star$  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.

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.