### FORM 4

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

OMB APPROVAL
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	s)													
1. Name and Address of Reporting Person * LEE DANIEL R				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 X Officer (give title below) Other (specify below)  Chief Executive Officer					
(Last) (First) (Middle) C/O FULL HOUSE RESORTS, INC., 1980 FESTIVAL PLAZA DRIVE, SUITE 680				3. Date of Earliest Transaction (Month/Day/Year) 12/12/2018											
(Street) LAS VEGAS, NV 89135				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm 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/Yea			2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)		*			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	ip of I Bei O) Ow	7. Nature of Indirect Beneficial Ownership	
				Code	V	Amount (A) or (D) P		Price				or Indire (I) (Instr. 4)		str. 4)	
Common Stock		12/12/2018		P		5,000	A	\$ 2.16	1,018,840		D				
Common Stock		12/12/2018		P		5,000	A	\$ 2.13	132,945		I		By subtrust		
Common Stock		12/12/2018		P		5,000	A	\$ 2.15	144,735		I	Ву	trust		
Common Stock									15,926		I	cus	As custodian for daughter		
Reminder:	Report on a s	separate line fo	or each class of secur	rities beneficially ov		Pers	sons who	respo	orm are	e not requ	ction of inf uired to res OMB cont	spond unl	ess	EC 147	74 (9-02)
				Derivative Securiti e.g., puts, calls, wa						lly Owned					
1. Title of Derivative Conversion Security (Instr. 3)  Price of Derivative Security  3. Transactio Date (Month/Day/		Year) Execution Da	te, if Transaction Code Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and (Mo	Date Exercisable and Expiration Date Anonth/Day/Year)			itle and ount of lerlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owr Forr Ily Deri Secu Dire or Ir on(s) (I)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial	
				Code V	(A) (D)	Date	e I rcisable I	Expiration Date	on Title	Amount or Number of Shares					

#### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
LEE DANIEL R C/O FULL HOUSE RESORTS, INC. 1980 FESTIVAL PLAZA DRIVE, SUITE 680 LAS VEGAS, NV 89135	X		Chief Executive Officer					

# Signatures /s/ Lewis A. Fanger, Attorney-in-Fact ---Signature of Reporting Person Date 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.