#### Edgar Filing: DAVID ROBBINS - Form 4

DAVID ROBE Form 4	SINS									
February 13, 20	006									
FORM	4							OMB AF	PROVAL	
••••		SECURITIES AND EXCHANGE CO Washington, D.C. 20549				OMMISSION	OMB Number:	3235-0287		
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations	NT OF CHANG	F CHANGES IN BENEFICIAL OWN SECURITIES					Expires: January 20 Estimated average burden hours per response			
may continu <i>See</i> Instruct 1(b).	ion	of the Public Util 30(h) of the Invo	•	•	•			I		
(Print or Type Res	ponses)									
1. Name and Address of Reporting Person <u>*</u> DAVID ROBBINS		son <u>*</u> 2. Issuer N Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol ALLIANCE GAMING CORP [AGI]				5. Relationship of Reporting Person(s) to Issuer			
							(Check all applicable)			
(Last) (First) (Middle) 6601 S BERMUDA ROAD		(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 02/09/2006				X_ Director 10% Owner Officer (give title Other (specify below) below)			
LAS VEGAS,	(Street) NV 89119	4. If Amenc Filed(Month	lment, Date /Day/Year)	Original			6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M Person	ne Reporting Per	rson	
(City)	(State) (Zij	p) <b>Table</b>	I - Non-Der	ivative Sec	uritie		ired, Disposed of,	or Beneficiall	v Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)			quired of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
A 11'			Code V	Amount		Price	(Instr. 3 and 4)			
Alliance Gaming Corporation Common Stock, \$0.10 par value	02/09/2006		М	21,429	А	\$ 3.5	108,573	D		
Alliance Gaming Corporation Common Stock, \$0.10 par value	02/09/2006		Х	7,143	А	\$ 3.5	17,143	I	By Trust	

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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 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	Securitie Acquire Dispose	ve es d (A) or	6. Date Exerci Expiration Dat (Month/Day/Y	te	7. Title and 2 Underlying 9 (Instr. 3 and	Securi
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Nun of S
Employee Stock Options (Right to Buy)	\$ 3.5	02/09/2006		G <u>(1)</u> V		7,143	01/07/1997	01/07/2007	Common Stock, \$0.10 par value per share	7,1
Employee Stock Options (Right to Buy)	\$ 3.5	02/09/2006		G <u>(1)</u> V	7,143		01/07/1997	01/07/2007	Common Stock, \$0.10 par value per share	7,1
Employee Stock Options (Right to Buy)	\$ 3.5	02/09/2006		М		21,429	01/07/1997	01/07/2007	Common Stock, \$0.10 par value per share	21,
Employee Stock Options (Right to Buy)	\$ 3.5	02/09/2006		Х		7,143	01/07/1997	01/07/2007	Common Stock, \$0.10 par value per share	7,1

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
I. O.	Director	10% Owner	Officer Other			
DAVID ROBBINS						
6601 S BERMUDA ROAD	Х					
LAS VEGAS, NV 89119						

## Signatures

/s/ David Robbins

02/13/2006

**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).
- (1) Gift of options to the David and Jill Robbins 1999 Family Trust, of which Reporting Person's children are the sole beneficiaries.
- (2) Shares held in the name of the David and Jill Robbins 1999 Family Trust. Reporting Person disclaims beneficial ownership of these securities, except to the extent of any pecuniary interest therein.

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.