

LIPPARELLI MARK A
Form 3
January 26, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â LIPPARELLI MARK A		(Month/Day/Year)	ALLIANCE GAMING CORP [AGI]	
(Last)	(First)	(Middle)	01/18/2005	
ALLIANCE GAMING INC., Â 6601 S. BERMUDA ROAD			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)	(Check all applicable)			
			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
			(give title below) (specify below)	
			Executive Vice President	
LAS VEGAS, Â NV Â 89119		6. Individual or Joint/Group Filing(Check Applicable Line)		
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person	
			<input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Alliance Gaming Corporation, \$0.10 par	2,500	D	Â

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: LIPPARELLI MARK A - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Options (right to buy)	Â (1)	01/18/2015	Common Stock \$0.10 par value per share	75,000	\$ 11.16	D	Â
Employee Stock Options (right to buy)	Â (2)	02/10/2013	Common Stock \$0.10 par value per share	58,000	\$ 13.93	D	Â
Employee Stock Options (right to buy)	Â (2)	08/12/2013	Common Stock \$0.10 par value per share	30,000	\$ 21.53	D	Â
Employee Stock Options (right to buy)	Â (2)	08/17/2014	Common Stock \$0.10 par value per share	30,000	\$ 13.86	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
LIPPARELLI MARK A ALLIANCE GAMING INC. 6601 S. BERMUDA ROAD LAS VEGAS, NV 89119	Â	Â	Â Executive Vice President	Â

Signatures

Mark A
Lipparelli

01/26/2005

**Signature of
Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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) Options are exercisable in four installments, first installment vesting on the first anniversary of the grant date and with each successive installment vesting on successive anniversaries of grant date.
- (2) Options are exercisable in three installments, first installment vesting on the first anniversary of the grant date and with each successive installment vesting on successive anniversaries of grant date.

Edgar Filing: LIPPARELLI MARK A - Form 3

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.