DAVID ROBBINS

Form 4 May 27, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **DAVID ROBBINS**

2. Issuer Name and Ticker or Trading Symbol

Issuer

5. Relationship of Reporting Person(s) to

BALLY TECHNOLOGIES, INC.

(Check all applicable)

[BYI]

(Last) (First) 6601 S. BERMUDA ROAD 3. Date of Earliest Transaction

10% Owner Other (specify Officer (give title

(Month/Day/Year) 05/25/2010

Filed(Month/Day/Year)

(Street)

(Middle)

4. If Amendment, Date Original

_X__ Director

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

below)

LAS VEGAS, NV 89119

| (City) | (State) | (Zip) Tab | le I - Non-l | Derivative | Secui | ities Acquir | ed, Disposed of, | or Beneficially | y Owned |
|--|--------------------------------------|---|--|------------|-------|---------------|--|--|---|
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transactic Code (Instr. 8) | (A) or | | D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common Stock, par value \$.10 per share | 05/25/2010 | | M | 20,000 | A | \$ 9.1425 | 135,334 | D | |
| Common Stock, par value \$.10 per share | 05/25/2010 | | M | 20,000 | A | \$ 13.75 | 155,334 | D | |
| Common Stock, par value \$.10 per share | 05/26/2010 | | S | 8,100 | D | \$ 40.5629 | 147,234 | D | |

Edgar Filing: DAVID ROBBINS - Form 4

| Common Stock, par value \$.10 per share | 05/26/2010 | S | 1,900 | D | \$ 41.1866 (2) | 145,334 | D |
|--|------------|---|-------|---|--------------------------|---------|---|
| Common Stock, par value \$.10 per share | 05/27/2010 | S | 5,700 | D | \$ 41.9269 (3) | 139,634 | D |
| Common Stock, par value \$.10 per share | 05/27/2010 | S | 4,300 | D | \$ 42.627 (<u>4)</u> | 135,334 | 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 in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

share

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. Transactic Code (Instr. 8) | 5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | Expiration Date (Month/Day/Year) A) d of | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|--|---|--------|---|--------------------|---|-------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Options (Right to Buy) | \$ 9.1425 | 05/25/2010 | | M | | 20,000 | 06/25/2001 | 06/25/2011 | Common Stock, par value \$.10 per share | 20,000 |
| Employee Stock Options (Right to | \$ 13.75 | 05/25/2010 | | M | | 20,000 | 12/11/2001 | 12/11/2011 | Common Stock, par value \$.10 per | 20,000 |

Reporting Owners

Buy)

Relationships

Reporting Owner Name / Address

Reporting Owners 2

Edgar Filing: DAVID ROBBINS - Form 4

Director 10% Owner Officer Other

DAVID ROBBINS 6601 S. BERMUDA ROAD X LAS VEGAS, NV 89119

Signatures

Mark Lerner, attorney-in-fact for: David Robbins 05/27/2010

**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).
- This transaction was executed in multiple trades at prices from \$40.11 to \$41.105. The price above reflects the weighted average sale (1) price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- This transaction was executed in multiple trades at prices from \$41.115 to \$41.25. The price above reflects the weighted average sale (2) price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
 - This transaction was executed in multiple trades at prices from \$41.47 to \$42.45. The price above reflects the weighted average sale price.
- (3) The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
 - This transaction was executed in multiple trades at prices from \$42.485 to \$42.73. The price above reflects the weighted average sale
- (4) price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- (5) Granted as compensation for services

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.

Signatures 3