ALANCO TECHNOLOGIES INC

Form 4

January 22, 2008

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

OMB APPROVAL

3235-0287

Expires:

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if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Check this box

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 * ANDERSON DONALD E

2. Issuer Name and Ticker or Trading

Issuer

Symbol ALANCO TECHNOLOGIES INC

(Check all applicable)

5. Relationship of Reporting Person(s) to

[ALAN]

(Last) (First) 3. Date of Earliest Transaction

X Director Officer (give title X 10% Owner

15575 N 83RD WAY, SUITE 3

01/18/2008

Code

(Instr. 8)

below)

Other (specify

(Street)

2. Transaction Date 2A. Deemed

(Middle)

4. If Amendment, Date Original

(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line)

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

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Owned

Following

SCOTTSDALE, AZ 85260

1.Title of

Security

(Instr. 3)

(City) (State) (Zip)

(Month/Day/Year)

3. 4. Securities

TransactionAcquired (A) or Disposed of (D)

5. Amount of Securities Beneficially

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial

Ownership (I) (Instr. 4) (Instr. 4)

(A) or

Reported Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

(Instr. 3, 4 and 5)

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

Execution Date, if

(Month/Day/Year)

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 3. Transaction Date 3A. Deemed 4. 5. Number of 6. Date Exercisable and 7. Title and Amoun TransactionDerivative Derivative Conversion (Month/Day/Year) **Expiration Date** Underlying Securit Execution Date, if or Exercise Code Securities (Month/Day/Year) (Instr. 3 and 4) Security any

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| (Instr. 3) | Price of Derivative Security | | (Month/Day/Year) | (Instr. 8 | 3) | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | | |
|---|------------------------------------|------------|------------------|-----------|----|---|-----|---------------------|--------------------|----------------------------|-----------------------|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amor Numl Share |
| Series A Convertible Preferred Stock | \$ 1.25 | 01/18/2008 | | P | | 333,500 | | 01/18/2008 | <u>(1)</u> | Class A Common Stock | 400 |
| Class A Common Stock Warrant | \$ 1.75 | 01/18/2008 | | A | | 333,500 | | 01/18/2008 | 01/18/2013 | Class A Common Stock | 333 |
| Series A Convertible Preferred Stock | \$ 1.25 | 01/20/2008 | | J(2) | | 80,118 | | 01/20/2008 | <u>(1)</u> | Class A Common Stock | 96, |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|--|
| • 0 | Director | 10% Owner | Officer | Other | | | | |
| ANDERSON DONALD E 15575 N 83RD WAY SUITE 3 SCOTTSDALE, AZ 85260 | X | X | | | | | | |

Signatures

Donald E.
Anderson

**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) Until redeemed, undeterminable.
- (2) Series A Preferred Stock Dividend

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.

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