#### CARLSON JOHN A

Form 4

September 13, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB

**OMB APPROVAL** 

3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue.

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

CARLSON JOHN A

(Last) (First)

(Middle)

15575 N 83RD WAY

(Street)

2. Issuer Name and Ticker or Trading

Symbol

ALANCO TECHNOLOGIES INC [ALAN]

3. Date of Earliest Transaction (Month/Day/Year)

09/13/2005

4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

\_X\_\_ Director 10% Owner X\_ Officer (give title Other (specify

below) below)

Chief Financial Officer

6. Individual or Joint/Group Filing(Check

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

SCOTTSDALE, AZ 85260

(City) (State) (Zip)

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Execution Date, if (Month/Day/Year)

3.

4. Securities TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

Code V Amount (D) Price

(A)

5. Amount of Securities Beneficially Owned Following Reported

Transaction(s) (Instr. 3 and 4)

Form: Direct (T) (Instr. 4)

6. Ownership 7. Nature of Indirect (D) or Indirect Beneficial Ownership (Instr. 4)

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if

any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

### Edgar Filing: CARLSON JOHN A - Form 4

| (Instr. 3)                  | Price of<br>Derivative<br>Security |            | (Month/Day/Year) | (Instr. | 8) | Acquired (A Disposed of (Instr. 3, 4, 5) | f (D) |                     |                    |                            |                            |
|-----------------------------|------------------------------------|------------|------------------|---------|----|--|-------|---------------------|--------------------|----------------------------|----------------------------|
|                             |                                    |            |                  | Code    | V  | (A)                                      | (D)   | Date<br>Exercisable | Expiration<br>Date | Title                      | Amount<br>Number<br>Shares |
| Class A Common Stock Option | \$ 0.81                            | 09/13/2005 |                  | A       |    | 200,000                                  |       | 09/13/2005          | 09/13/2015         | Class A<br>Common<br>Stock | 200,00                     |

# **Reporting Owners**

| Reporting Owner Name / Address    | Relationships |           |           |       |  |  |  |
|-----------------------------------|---------------|-----------|-----------|-------|--|--|--|
| Troporting o mior runno / runno o | Director      | 10% Owner | Officer   | Other |  |  |  |
| CARLSON JOHN A                    |               |           | Chief     |       |  |  |  |
| 15575 N 83RD WAY                  | X             |           | Financial |       |  |  |  |
| SCOTTSDALE, AZ 85260              |               |           | Officer   |       |  |  |  |

## **Signatures**

| John A. Carlson | 09/13/2005 |  |  |
|-----------------|------------|--|--|
| **Signature of  | 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.

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