

AVILES JOAQUIN J.
Form 3
March 29, 2010

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)

<p>1. Name and Address of Reporting Person *</p> <p>Â AVILES JOAQUIN J.</p> <p>(Last) (First) (Middle)</p> <p>C/O MULTIMEDIA GAMES, INC.,Â 206 WILD BASIN ROAD, BLDG. B, SUITE 400</p> <p>(Street)</p> <p>AUSTIN,Â TXÂ 78746</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>03/23/2010</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>MULTIMEDIA GAMES INC [MGAM]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other</p> <p>(give title below) (specify below)</p> <p>Vice President of Technology</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/> Form filed by More than One Reporting Person</p>
--	---	---	---	---	--

Table I - Non-Derivative Securities Beneficially Owned

<p>1. Title of Security</p> <p>(Instr. 4)</p>	<p>2. Amount of Securities Beneficially Owned</p> <p>(Instr. 4)</p>	<p>3. Ownership Form:</p> <p>Direct (D) or Indirect (I)</p> <p>(Instr. 5)</p>	<p>4. Nature of Indirect Beneficial Ownership</p> <p>(Instr. 5)</p>
---	---	---	---

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)

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

				Shares		or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy)	07/02/2009 ⁽¹⁾	07/02/2016	Common Stock	150,000	\$ 4.8	D	Â
Employee Stock Option (Right to Buy)	09/30/2009 ⁽¹⁾	09/30/2016	Common Stock	10,000	\$ 5.12	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
AVILES JOAQUIN J. C/O MULTIMEDIA GAMES, INC. 206 WILD BASIN ROAD, BLDG. B, SUITE 400 AUSTIN, TX 78746	Â	Â	Â Vice President of Technology	Â

Signatures

/s/ Velissa Kellicut, Attorney-in-Fact for Joaquin J. Aviles
03/29/2010

**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) The option is immediately exercisable, but the option shares are initially unvested and will vest 25% after one year, and will continue to vest in equal quarterly installments during each of the following three years.

Â

Remarks:

The Board of Directors of the Issuer determined on March 23, 2010 that Reporting Person should

This Form 3 was executed by Velissa Kellicut pursuant to the Limited Power of Attorney filed her

EXHIBIT LIST

Exhibit 24. Power of Attorney

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.