#### LSI INDUSTRIES INC

Form 4

November 16, 2006

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

**OMB APPROVAL** 

10% Owner

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

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

obligations

may continue.

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 See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Serrianne Mark A

(First)

(Street)

2. Issuer Name and Ticker or Trading Symbol

Issuer

5. Relationship of Reporting Person(s) to

(Last)

(Middle)

LSI INDUSTRIES INC [LYTS]

(Check all applicable)

10000 ALLIANCE ROAD

3. Date of Earliest Transaction

(Month/Day/Year) 11/14/2006

Filed(Month/Day/Year)

Other (specify Officer (give title

below)

4. If Amendment, Date Original

Applicable Line)

X\_ Director

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

CINCINNATI, X1 45242

(City) (State) (Zip)

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

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

4. Securities TransactionAcquired (A) or Code Disposed of (D) (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A) or

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

1,758 D

Common Shares

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

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)

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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. Transacti Code (Instr. 8)	Securities	6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 I S (
				Code V	(A) (D	) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy	\$ 8.55					08/11/2004	08/11/2014	Common Shares	1,500	
Option to Buy	\$ 9.96					10/27/2004	10/27/2014	Common Shares	5,000	
Option to Buy	\$ 10.71					11/18/2004	11/18/2014	Common Shares	1,500	
Option to Buy	\$ 17.02					11/15/2005	11/15/2015	Common Shares	1,500	
Option to Buy	\$ 17.6					(2)	08/24/2016	Common Shares	2,500	
Option to Buy	\$ 17.55	11/14/2006		A	1,500	(3)	11/14/2016	Common Shares	1,500	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships									
1 6	Director	10% Owner	Officer	Other						
Serrianne Mark A 10000 ALLIANCE ROAD CINCINNATI, X1 45242	X									
Signatures										
Mark A. Weiss, Attorney-in-Fa	11/15/2006									

\*\*Signature of Reporting Person

Reporting Owners 2

Date

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## **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) Non-Qualified stock options granted pursuant to the Company's 2003 Equity Compensation Plan.
- (2) The options vest at a rate of 25% at the conclusion of each 90 day period following the grant date, August 24, 2006.
- (3) The options vest at a rate of 25% at the conclusion of each 90 day period following the grant date, November 14, 2006.

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.