Edgar Filing: LSI INDUSTRIES INC - Form 4

LSI INDUS	TRIES INC										
Form 4 May 13, 201	5										
	_								OMB A	PPROVAL	
FORN Check th		ATTIES A			NGE (COMMISSION	OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 of Form 5 obligatio may con See Instr 1(b).	 STATEMENT OF CHANGES IN 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 20(b) of the Investment Company Act of 1940 							January 31 Expires: 2005 Estimated average burden hours per response 0.5			
(Print or Type]	Responses)										
			2. Issuer Name and Ticker or Trading Symbol LSI INDUSTRIES INC [LYTS]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	Aiddle)	3. Date of Earliest Transaction (Check					k all applicable)			
LSI INDUS ALLIANCI	STRIES, INC., 10 E ROAD	00	(Month/D 05/12/20	ay/Year)				Director X Officer (give below) Pres LS		6 Owner er (specify itions	
	(Street)			ndment, Dat th/Day/Year)	-			6. Individual or Jo Applicable Line) _X_ Form filed by 0			
CINCINNA	ATI, OH 45242								Aore than One Re		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acq	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Executio any	on Date, if	3. Transactic Code (Instr. 8)	on(A) or D (D)	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Shares	05/12/2015			Code V P	Amount 250	(D) A	Price \$ 9.09	(Instr. 3 and 4) 250	D		
Common Shares (1)								9,135	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.

Edgar Filing: LSI INDUSTRIES INC - Form 4

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy (3)	\$ 6.81					(2)	11/20/2024	Common Shares	30,000	
Option to Buy (3)	\$ 5.21					(2)	08/19/2020	Common Shares	9,000	
Option to Buy (3)	\$ 6.58					(2)	08/16/2022	Common Shares	20,000	
Option to Buy (3)	\$ 7.2					(2)	08/23/2023	Common Shares	25,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Toney Shawn LSI INDUSTRIES, INC. 1000 ALLIANCE ROAD CINCINNATI, OH 45242			Pres LSI Lighting Solutions				
Signatures							
/s/ F. Mark Reuter as Attorney-in-Fact for Shawn Toney			05/13/2015				
<u>**</u> Signature of Reportin	g Person		Date				
Evolopation of Da		0001					

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).

Edgar Filing: LSI INDUSTRIES INC - Form 4

- (1) Common Shares held in the LSI Industries Inc. Non-Qualified Deferred Compensation Plan.
- (2) The options vest at a rate of 25% per year beginning on the first anniversary of the grant date.
- (3) These holdings have been previously reported on Form 4.

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.