LSI INDUSTRIES INC

Form 4

August 29, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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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)

(Ctata)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Wells Dennis W. Issuer Symbol LSI INDUSTRIES INC [LYTS] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) _X__ Director 10% Owner Other (specify X_ Officer (give title 10000 ALLIANCE ROAD 08/25/2016 below) CEO and President (Street) 4. If Amendment, Date Original 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 CINCINNATI, OH 45242 Person

(City)	(State)	(Zip) Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of	2. Transaction Date		3.	4. Securi			5. Amount of	6. Ownership	
Security	(Month/Day/Year)	Execution Date, if	Transactio	` ′		` ′	Securities	Form: Direct	Indirect Beneficial
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)	(Instr. 3,	4 and	3)	Beneficially Owned	(D) or Indirect (I)	Ownership
		(Monun Day/ Tear)	(msu. o)				Following	(Instr. 4)	(Instr. 4)
							Reported	(1110417-1)	(1115111 1)
					(A)		Transaction(s)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Shares (1)	08/25/2016		A	3,092	A	\$ 10.02	19,628	D	
Common Shares							28,885	D	

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 (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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr
					4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of	
Option to Buy	\$ 5.96			Code V	(A) (D)	(<u>2</u>)	10/01/2024	Common Shares	Shares 100,000	
Option to Buy	\$ 6.81					(2)	11/20/2024	Common Shares	75,000	
Option to Buy	\$ 6.55					(2)	01/02/2025	Common Shares	39,923	
Option to Buy	\$ 9.39					(2)	07/01/2025	Common Shares	45,000	
Option to Buy	\$ 11.06					(2)	07/01/2026	Common Shares	60,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting of their remains a remainder	Director	10% Owner	Officer	Other			
Wells Dennis W. 10000 ALLIANCE ROAD CINCINNATI, OH 45242	X		CEO and President				

Signatures

/s/ F. Mark Reuter as Attorney-in-Fact for Dennis W. 08/29/2016 Wells **Signature of Reporting Person Date

2 Reporting Owners

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) 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.