#### Edgar Filing: ANDERSONS INC - Form 4

Check this box if no longer subject to Section 16. Form 4 or Form 5	UNITED STATE STATEMENT C Filed pursuant to ection 17(a) of the 30(h	Washingto DF CHANGES II SECU Section 16(a) of	n, D.C. 2 N BENEI JRITIES the Secur olding Co	<b>0549</b> FICIAL ( ities Exclompany A	<b>OW</b> I hange	NERSHIP e Act of 19 7 1935 or S	<b>OF</b> 034,	OMB Number: Expires: Estimate burden h response	Januar d average ours per	)287
(Thit of Type Kesponse	-5)									
1. Name and Address of McKinstray Neill (	Symbol Issuer					-	Reporting Person(s) to			
(Last) (Fin P O BOX 119	rst) (Middle)	3. Date of Earliest Transaction       (Che         (Month/Day/Year)       Director         04/22/2014       Officer (give below)					or er (give t	ck all applicable) e title Other (specify below) ent, Ethanol Group		
(Str MAUMEE, OH 43		Filed(Month/Day/Year) Applicable Li: _X_Form file Form file				l or Joint/Group Filing(Check ine) ed by One Reporting Person ed by More than One Reporting				
(City) (Sta		Table I - Non	-Derivativ	e Securitie	s Aca	Person	sed of.	or Benefic	vially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3.	4. Securit onor Dispos (Instr. 3, 4	ies Ac ed of (	equired (A) (D)	5. Am Secur Benef Owne Follow Repor Trans	ount of ities icially d ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK	04/22/2014		J <u>(1)</u>	7.6588	A	\$ 63.7266	45,22	21.0628	D	
COMMON STOCK							2,37	7.62	Ι	Held by Spouse
PERFORMANCE SHARE UNIT (2015)							3,70	5 (2)	D	
PERFORMANCE SHARE UNIT (2016)							2,47	5 (3)	D	
							2,950	) (2)	D	

PERFORMANCE SHARE UNIT (2017)

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.

## 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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	te	7. Title and Am Underlying Sec (Instr. 3 and 4)		8. I De Sec (In
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
SOSAR	\$ 21.83					03/01/2011	04/01/2015	COMMON STOCK	3,338	

### **Reporting Owners**

Reporting Owner Name / Address			Relationships			
r	Director	10% Owner	Officer	Other		
McKinstray Neill C P O BOX 119 MAUMEE, OH 43537			President, Ethano	ol Group		
Signatures						
Neill C. McKinstray, by Russ Attorney	04/29/2014					
**Signature of R	eporting Pers	son		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).
- (1) Reinvestment of dividend

#### Edgar Filing: ANDERSONS INC - Form 4

- (2) Stock performance unit granted pursuant to The Andersons, Inc. Plan. Units vest 100% in 3 years contingent on cumulative EPS. Number of underlying shares are determined by the three-year cumulative fully diluted EPS for the performance period.
- (3) Stock performance unit granted pursuant to The Andersons, Inc. plan. Units vest 100% in 27 months contingent on cumulative EPS from 10/01/2013 to 12/31/2015. Number of underlying shares are determined by the twenty-seven months cumulative fully diluted EPS for...

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.