Edgar Filing: Croskey Jeff A - Form 4

Croskey Jeff	А											
Form 4												
January 23, 2	2018											
FORM			CECUD	TTIES A			NCE	COMMISSION	r	PPROVAL		
		USIAIES		hington,			NGE (201911911551019	OMB Number:	3235-0287		
Check thi	s box		vv as	inington,	D.C. 20.	J - J				January 31,		
if no long		EMENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Expires:	2005		
subject to Section 1				SECURITIES					Estimated average burden hours per			
	Form 4 or									response 0.5		
Form 5	Filed p	ursuant to	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	•			
obligation may cont				•	•	· ·		f 1935 or Sectio	n			
See Instru		30(h)	of the In	vestment	Compan	y Act	t of 194	40				
1(b).												
(Print or Type R	(esponses)											
(I find of Type I	(csponses)											
1. Name and Address of Reporting Person [*]			2. Issuer	2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to			
Croskey Jeff	f A		Symbol				0	Issuer				
			LSI INI	LSI INDUSTRIES INC [LYTS]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check									
			(Month/D	ay/Year)				Director 10% Owner				
10000 ALLIANCE ROAD 01/19			01/19/20	018				_X_ Officer (give title Other (specify below) below)				
								· · · · · · · · · · · · · · · · · · ·	Graphics Segme	ent		
	(Street)		4. If Ame	ndment, Dat	te Original			6. Individual or Jo	oint/Group Filin	1g(Check		
			Filed(Mon	th/Day/Year)				Applicable Line)				
								_X_Form filed by C	One Reporting Pe More than One Re			
CINCINNA	TI, OH 45242							Person		porting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Acc	uired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction D	Date 2A. Dee	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yes		on Date, if	Transactio		ispose	d of	Securities	Form: Direct			
(Instr. 3)		any (Month/	'Day/Year)	Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership			
		(intolial)	Duj, I cui)	(111541: 0)	(11501.5,	i una	5)	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
G				Code V	Amount	(D)	Price	(Instr. 5 and 1)				
Common Shares (1)	01/19/2018			А	92	А	\$ 7.06	3,811	D			
							7.06					
Common								11,500	D			
Shares								,				

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, 4, and 5)		ate	7. Title and A Underlying S (Instr. 3 and	Securities	8. Price Deriva Securit (Instr. :
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy (2)	\$ 9.05					(3)	10/12/2025	Common Stock	20,000	
Option to Buy (2)	\$ 11.06					(3)	07/01/2026	Common Stock	30,000	
Option to Buy	\$ 5.92					(4)	08/17/2027	Common Stock	30,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Croskey Jeff A 10000 ALLIANCE ROAD CINCINNATI, OH 45242			Pres., Graphics Segment				
Signaturaa							

Signatures

/s/ F. Mark Reuter as Attorney-in-Fact for Jeff A. Croskey

**Signature of Reporting Person

Explanation of Responses:

*	If the form is filed by more than one reporting person, <i>see</i> 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)	These holdings have been previously reported on Form 4.
(3)	The options vest at a rate of 25% per year beginning on the first anniversary of the grant date.

01/23/2018

Date

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(4) The options vest ratably over a three year time period.

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.