Bastian Jeffery S. Form 4 January 02, 2019

FORM 4

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

OMB APPROVAL OMB

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Bastian Jeffery S.

2. Issuer Name and Ticker or Trading

Issuer

Symbol LSI INDUSTRIES INC [LYTS]

(Month/Day/Year)

(Last) (First) (Middle)

3. Date of Earliest Transaction

Director 10% Owner X_ Officer (give title

C/O LSI INDUSTRIES INC., 10000

12/31/2018

Other (specify

(Check all applicable)

below) Chief Accounting Officer

5. Relationship of Reporting Person(s) to

ALLIANCE ROAD

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

CINCINNATI, OH 45242

(City)	(State)	Zip) Table	e I - Non-D	erivative Securities Acc	quired, Disposed o	of, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	(A) or Amount (D) Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Shares (1)	12/31/2018		A	357 A \$ 3.17	5,638	D	
Common Shares					9,020	D	

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

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$\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (\emph{e.g.}, puts, calls, warrants, options, convertible securities) \\ \end{tabular}$

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)	TransactionNumber Code of				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :
				Code V	(A) (I	O)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy	\$ 9.15						(3)	06/12/2027	Common Shares	5,000	
Option to Buy	\$ 8.98						(3)	08/22/2018	Common Shares	903	
Option to Buy	\$ 8.4						(3)	08/21/2019	Common Shares	15,000	
Option to Buy	\$ 6.58						(3)	08/16/2022	Common Shares	11,250	
Option to Buy	\$ 7.2						(3)	08/23/2023	Common Shares	17,000	
Option to Buy	\$ 6.81						(3)	11/20/2024	Common Shares	20,000	
Option to Buy	\$ 9.39						(3)	07/01/2025	Common Shares	15,000	
Option to Buy	\$ 11.06						(3)	07/01/2026	Common Shares	10,000	
Option to Buy	\$ 5.92						<u>(4)</u>	08/17/2027	Common Shares	18,000	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Bastian Jeffery S. C/O LSI INDUSTRIES INC. 10000 ALLIANCE ROAD CINCINNATI, OH 45242

Chief Accounting Officer

Signatures

/s/ F. Mark Reuter as Attorney-in-Fact on behalf of Jeffery S. Bastian

01/02/2018

**Signature of Reporting Person

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) 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 option vests at a rate of 25% per year beginning on the one year anniversary of the date of grant.
- (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.

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