Croskey Jeff A Form 4 April 02, 2019

## FORM 4

#### OMB APPROVAL

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

OMB Number: 3235-0287

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average burden hours per

Form 4 or Form 5 obligations may continue. See Instruction

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

response... 0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting	Person *	2. Issuer Name and Ticker or Trading	5. Relationship of Reporting Person(s) to		
Croskey Jeff A		Symbol LSI INDUSTRIES INC [LYTS]	Issuer (Check all applicable)		
(Last) (First) (I	Middle)	3. Date of Earliest Transaction	(Check an approach)		
		(Month/Day/Year)	Director 10% Owner		
10000 ALLIANCE ROAD		03/29/2019	X Officer (give title Other (spe below) below)		
			Pres., Graphics Segment		
(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
		Filed(Month/Day/Year)	Applicable Line)		
CINCINNATI, OH 45242			_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State)	(Zin)				

(City)	(State) (2	Table	I - Non-De	erivative S	ecurities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securiti n(A) or Dis	ies Acquired sposed of	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
(Instr. 3)	•	any	Code	(D)	_	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4	(A) or	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
			Code V	Amount	(D) Price	(Ilisti. 3 and 4)		
Common Shares (1)	03/29/2019		A	735	A \$ 2.63	9,039	D	
Common Shares						11,500	D	

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

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SEC 1474

(9-02)

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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. Transaction Code (Instr. 8)	5. Dr.Number 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 Derivat Securit (Instr. :
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option to Buy	\$ 9.05					(3)	10/12/2025	Common Stock	20,000	
Option to Buy	\$ 11.06					(3)	07/01/2026	Common Stock	30,000	
Option to Buy	\$ 5.92					<u>(4)</u>	08/17/2027	Common Stock	30,000	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

Croskey Jeff A

10000 ALLIANCE ROAD Pres., Graphics Segment

CINCINNATI, OH 45242

### **Signatures**

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

Croskey 04/02/2019

\*\*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 options vest at a rate of 25% per year beginning on the first anniversary of the grant 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.