Edgar Filing: LA-Z-BOY INC - Form 4

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| Form 4 | INC | | | | | | | | | | |
|---|---|------------|---|--|------------|-----------|--|---|---|---------------------|--|
| September (| 08, 2014 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | OMB APPROVAL | | |
| | SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | OMMISSION | OMB Number: | 3235-0287 | | | |
| Check the check | loer | | | | | - ~ | | | Expires: | January 31, 2005 | |
| subject Section Form 4 Form 5 | F CHANGES IN BENEFICIAL OWNERSHIP OI SECURITIES | | | | | | Estimated average burden hours per response 0. | | | | |
| obligation may cor <i>See</i> Inst 1(b). | ons Section 17 | (a) of the | Public U | | lding Cor | npan | y Act of | e Act of 1934, 1935 or Section 0 | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Bacon Mark | | | 2. Issuer Name and Ticker or Trading Symbol LA-Z-BOY INC [LZB] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | | | | | (Check | eck all applicable) | | |
| (Mor 1284 NORTH TELEGRAPH ROAD 09/0 (Street) 4. If | | | (Month/Day/Year) 09/04/2014 | | | | | Director10% Owner XOfficer (give titleOther (specify below)Delow) Senior Vice President 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| | | | | If Amendment, Date Original led(Month/Day/Year) | | | | | | | |
| MONROE | , MI 48162 | | | | | | | Form filed by Mo Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Tab | ole I - Non- | Derivative | Secur | rities Acqu | iired, Disposed of, | or Beneficial | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date 2A. Deem (Month/Day/Year) Execution any (Month/D | | Date, if | 4. Securit order Dispos (Instr. 3, 4 | ed of (| | Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code V | Amount | or (D) | Price | Transaction(s) (Instr. 3 and 4) | (Instr. 4) | | |
| Common Shares | 09/04/2014 | | | S | 200 | D | \$ 22.44 | 119,275 | D | | |
| Common Shares | 09/04/2014 | | | S | 22,400 | D | \$ 22.3676 | ₅ 96,875 | D | | |

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.

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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) | 4. Transact Code (Instr. 8) | 5. ionNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | ; | ate | Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--------------------------------------|---|---------------------|--------------------|-------|--|---|---|
| | | | Code V | ′ (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|-----------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Bacon Mark 1284 NORTH TELEGRAPH ROAD MONROE, MI 48162 | | | Senior Vice President | | | | | |
| Signatures | | | | | | | | |
| James P. Klarr, Attorney | | | | | | | | |
| in fact (| 9/08/2014 | | | | | | | |

**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).

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.