Edgar Filing: Andersons, Inc. - Form 4

Andersons, Inc. Form 4 November 19, 20 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instruction 1(b).	U S Sec	TATEMENT C Filed pursuant to ction 17(a) of the 30(h	S SECURITIES Washingto OF CHANGES IN SECU Section 16(a) of Public Utility Ho) of the Investmen	n, D.C N BEN (RITI) the Secolding	C. 20 NEF ES curi Coi	D549 FICIAL	OW I hang	NERSHI e Act of 1 ? 1935 or ;	P OF 1934,	OMB Numb Expir Estim burde respo	ber: ³²	235-0287 nuary 31, 2005 ge	
1. Name and Address of Reporting Person <u>*</u> Conrad Nicholas C								5. Relatior Issuer	ationship of Reporting Person(s) to				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Che					(Check	ck all applicable)				
PO BOX 119								cer (give t	ive title 00% Owner Other (specify below) Finance & Treasurer				
(Street) 4. If Amendment, Filed(Month/Day/Y				ear) Applicable Line _X_ Form filed					Line) filed by Oı	r Joint/Group Filing(Check) by One Reporting Person by More than One Reporting			
MAUMEE, OH								Person	ned by Mc	ne man	One Reportin	g	
	(State)		Table I - Non		ative		_				-		
1.Title of Security (Instr. 3)			any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) (A) or (A) or (Instr. 3) Beneficially Owned Following Reported Transaction(s (Instr. 3 and 4)				s ally g ion(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
COMMON		10/22/2014		Code J(1)	v	Amount 15.138	(D) A	Price \$	10,942.	62	D		
STOCK PERFORMANC SHARE UNIT				-		101100		60.64	2,363 (2		D		
(2015)									2,303 (4	<u>`</u>	D		
PERFORMANC SHARE UNIT (2016)	СE								1,545 <u>(</u>	<u>3)</u>	D		
PERFORMANC SHARE UNIT (2017)	СE								1,600 (2	2)	D		

Edgar Filing: Andersons, Inc. - Form 4

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Da	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
					(1) (D)			of			
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	Director 10% Owner O		Other				
Conrad Nicholas C PO BOX 119 MAUMEE, OH 43537			VP Finance & Treasurer					

Signatures

Nicholas Conrad, by: Mary Schroeder, Limited Power of Attorney

**Signature of Reporting Person

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) Acquisition pursuant to Rule 16b-3(c)
- (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.

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

11/19/2014

Date