Andersons, Inc. Form 4 November 21, 2016

FORM 4

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires. 2005
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OMB APPROVAL

3235-0287

January 31,

OMB

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Number:

Expires:

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

2. Issuer Name and Ticker or Trading

Andersons, Inc. [ANDE]

3. Date of Earliest Transaction

Symbol

(Middle)

1(b).

Wolf William J

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

	(Edst)	1 11 50	(ivildate)	J. Date of Earliest	Transaction	11						
	P O BOX 119			(Month/Day/Year) 11/18/2016					X_ Of below)	ector ficer (give title belo President, Plant N	/	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
MAUMEE, OH 43537								Form filed by More than One Reporting Person				
	(City) (S	State	e) (Zip)	Table I - Non	-Derivativ	e Secu	ıritie	es Acc	quired, Dis	sposed of, or Ben	eficially Owi	ned
	COMMON STOCK PERFORMANCE SHARE UNIT (2017) PERFORMANCE SHARE UNIT (2018) PERFORMANCE SHARE UNIT (2018)	Е	2. Transaction Date (Month/Day/Year) 11/18/2016	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	on(A) o (Inst	or Di r. 3,			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 37,057.534 2,950 (1) 4,416 (1) 3,636 (1)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) D D	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	(220) (2017)											

PERFORMANCE **SHARE UNIT** (TSR) (2019)

 $3,636 \frac{(2)}{}$

D

(9-02)

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber Expiration Date		ate	Amount of	Derivative	Deriv	
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities	(Instr. 5)	Bene
	Derivative		,	, ,	Securities			(Instr. 3 and 4	.)	Own
	Security				Acquired					Follo
					(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
					(Instr. 3,					(
					4, and 5)					
					., ,					
								Amour	nt	
						Date	Expiration	or		
						Exercisable	Date	Title Number	er	
								of		
				Code V	(A) (D)			Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

Wolf William J P O BOX 119

President, Plant Nutrient Grp

MAUMEE, OH 43537

Signatures

William J. Wolf, by Mary Schroeder, Limited Power of Attorney

11/21/2016

**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).
- 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.
- (2) Stock performance unit (TSR) granted pursuant to The Andersons, Inc. Plan. Units vest 100% in 3 years contingent on the Company's annualized total shareholder return. Number of underlying shares are based upon the level of satisfaction of the total shareholder return

Reporting Owners 2

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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.