Edgar Filing: KINCAID STEVEN M - Form 4

| KINCAID S | TEVEN M | | | | | | | | | | |
|--|------------------|-------------|---|--|-----------|---|--|---|------------------|------------------------------|--|
| Form 4 | | | | | | | | | | | |
| August 25, 2 | 2010 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | PPROVAL | | | |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | SECUR | ITIES | January 31,Expires:2005Estimated averageburden hours perresponse0.5 | | | | | |
| Form 5 obligatio may con <i>See</i> Instr 1(b). | tinue. Section 1 | 7(a) of the | Public Ut | | ling Con | ipany | Act of | e Act of 1934, f 1935 or Sectio 40 | n | | |
| (Print or Type] | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> KINCAID STEVEN M | | | 2. Issuer Name and Ticker or Trading Symbol LA-Z-BOY INC [LZB] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Check | | | | | ck all applicable | | | |
| 1284 N. TE | LEGRAPH RO | AD | (Month/D 08/23/20 | • | | | | Director X Officer (give below) Senic | | o Owner er (specify nt | |
| | | | | ndment, Date Original th/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MONROE, | MI 48162 | | | | | | | Form filed by M Person | More than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Securi | ties Acq | uired, Disposed o | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | any | | emed on Date, if Day/Year) | 3. 4. Securities Acquired Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5) | | Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | Code V | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Shares | 08/23/2010 | | | F | 942 | D | \$ 6.75 | 99,294 | D | | |
| Common Shares | | | | | | | | 9,885 | Ι | by 401(k) | |

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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | int 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 | | | | | | | |
|--|---------------|-----------|-----------------------|-------|--|--|--|--|
| Reporting o when really readers | Director | 10% Owner | Officer | Other | | | | |
| KINCAID STEVEN M 1284 N. TELEGRAPH ROAD MONROE, MI 48162 | | | Senior Vice President | | | | | |
| Signatures | | | | | | | | |
| James P. Klarr, Attorney in Fact | 08/ | 25/2010 | | | | | | |

Date

**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).

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.