SCHIAVO MARY FACKLER

Form 4 July 06, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SCHIAVO MARY FACKLER

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

WORTHINGTON INDUSTRIES INC [WOR]

(Check all applicable)

(Last) (First) 3. Date of Earliest Transaction

(Month/Day/Year) 07/01/2010

X_ Director 10% Owner Officer (give title Other (specify

WORTHINGTON INDUSTRIES. INC., 200 OLD WILSON BRIDGE ROAD

(Middle)

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

6. Ownership 7. Nature of

Beneficial Ownership (Instr. 4)

Applicable Line)

5. Amount of

X Form filed by One Reporting Person Form filed by More than One Reporting

COLUMBUS, OH 43085

S (]

S (S

(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deemed Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

4. Securities Acquired

| Security (Instr. 3) | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transactio Code (Instr. 8) | n(A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially Owned Following | Form: Direct (D) or Indirect (I) (Instr. 4) | Indirect Beneficia Ownershi (Instr. 4) |
|---------------------|------------------|---|----------------------------------|--|------------------|-------------|--|---|---|
| | | | Code V | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (======== | (|
| Common Shares | 07/01/2010 | | M | 4,000 | A | \$9 | 15,611 | D | |
| Common Shares | 07/01/2010 | | M | 2,000 | A | \$ 11.05 | 17,611 | D | |

3.

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 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. Transactic Code (Instr. 8) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|--|-----|-------|--|--------------------|---|--|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Stock Option (Right to Purchase) | \$ 9 | 07/01/2010 | | M | | 4,000 | 09/28/2001(1) | 09/27/2010 | common shares | 4,000 |
| Stock Option (Right to Purchase) | \$ 11.05 | 07/01/2010 | | M | | 2,000 | 09/27/2002(1) | 09/26/2011 | common shares | 2,000 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| • | Director | 10% Owner | Officer | Other | | | |
| SCHIAVO MARY FACKLER WORTHINGTON INDUSTRIES, INC. 200 OLD WILSON BRIDGE ROAD COLUMBUS, OH 43085 | X | | | | | | |

Signatures

/s/Dale T. Brinkman as attorney-in-fact for Mary Schiavo 07/02/2010

Explanation of Responses:

**Signature of Reporting Person

- * 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).
- This option was granted out of the Worthington Industries, Inc. 2000 Stock Option Plan for Outside Directors and will become vested and (1) fully exercisable on the first to occur: (i) the first anniversary of the Grant Date or (ii) the date of the Company's next Annual Meeting of Shareholders following the Grant Date.

Date

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.

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