WORTHINGTON INDUSTRIES INC

Form 4/A July 15, 2014

FORM 4

OMB APPROVAL

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

OMB Number:

Expires:

3235-0287 January 31,

2005

0.5

if no longer subject to Section 16.

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average

response...

burden hours per

Form 4 or 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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **BILLMAN ANDREW J**

2. Issuer Name and Ticker or Trading

Issuer

Symbol

WORTHINGTON INDUSTRIES INC [WOR]

(Check all applicable)

Pres., Worthington Cylinders

5. Relationship of Reporting Person(s) to

(Last)

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

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

(Month/Day/Year)

200 OLD WILSON BRIDGE ROAD 07/01/2014

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

(Instr. 8)

4. If Amendment, Date Original

Applicable Line) _X_ Form filed by One Reporting Person

07/01/2014

Form filed by More than One Reporting

(Instr. 4)

Person

COLUMBUS, OH 43085

(City) (State) (Zip)

(Street)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)

(Month/Day/Year)

2. Transaction Date 2A. Deemed Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A)

(Instr. 3, 4 and 5)

Following Reported Transaction(s)

(Instr. 3 and 4)

Code V Amount (D) Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 3. Transaction Date 3A. Deemed 4. 5. Number 6. Date Exercisable and 7. Title and Amount Derivative Conversion (Month/Day/Year) Execution Date, if Transactionof **Expiration Date** of Underlying Security or Exercise Code Derivative (Month/Day/Year) Securities any

8.1

De

Sec

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year) (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			(Instr. 3 and 4) (I		(Ins				
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock, acquired under deferred compensation plan	(1)	07/01/2014		A		317 (2)		(3)	<u>(4)</u>	common shares	317	\$

Reporting Owners

Reporting Owner Name / Address	Relationships							
. 6	Director	10% Owner	Officer	Other				
BILLMAN ANDREW J 200 OLD WILSON BRIDGE ROAD COLUMBUS, OH 43085			Pres., Worthington Cylinders					

Signatures

/s/Dale T. Brinkman, as attorney-in-fact for Andrew J.
Billman

**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).
- (1) The accounts track common shares on a one-for-one basis
- (2) This transaction was inadvertently not reported due to an oversight.
- (3) The account balances related to the theoretical common shares may be immediately transferred to other investment options under the terms of the deferred compensation plans.
- (4) These are unfunded accounts under Worthington Industries, Inc.'s deferred compensation plan invested in phantom stock. Distributions are made only in cash, and generally commence upon retirement or other termination of employment.

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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