ANDERSONS INC Form 4 July 14, 2005

FORM 4

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

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

if no longer subject to Section 16. Form 4 or Form 5

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 A SMITH GAI	*	orting Person *	2. Issuer Name and Ticker or Trading Symbol ANDERSONS INC [ANDE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check an applicable)		
480 W DUS	SEL DR		(Month/Day/Year) 04/22/2005	Director 10% Owner X Officer (give title Other (specify below) VP Finance & Treasurer		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
MAUMEE,	ОН 43537		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zin)				

(City)	(State) (Zi	Table 1	I - Non-Dei	rivative S	ecurit	ies Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK	04/22/2005		Code V $J_{(1)}$	Amount 3.994	(D)	Price \$ 30.05	(Instr. 3 and 4) 15,933.687	D	
COMMON STOCK	07/13/2005		M	1,000	A	\$ 8.875	16,665.687	D	
COMMON STOCK	07/13/2005		F	471	D	\$ 39.15	16,194.687	D	

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

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number.

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. Transaction Code (Instr. 8)	Secur Acqu (A) o Dispo	erivative rities ired rosed of 3, 4,	6. Date Exercisab Date (Month/Day/Year	•	7. Title a Underlyi (Instr. 3
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title
STOCK OPTION	\$ 8.875	07/13/2005		M	()	1,000	01/01/1998	01/01/2008	COMN
PERFORMANCE SHARE UNIT	\$ 0 (2)						12/31/2007(2)	01/01/2008(2)	COMN
STOCK OPTION	\$ 12.7						01/01/2003	01/01/2008	COMN
STOCK OPTION	\$ 15.967						01/01/2004	01/01/2009	COMN
STOCK OPTION	\$ 10						01/01/2002	01/02/2007	COMN STO

COM

STO

03/31/2010

04/01/2005

Reporting Owners

\$31

Reporting Owner Name / Address	Relationships						
. 0	Director	10% Owner	Officer	Other			
SMITH GARY L 480 W DUSSEL DR MAUMEE, OH 43537			VP Finance & Treasurer				
^ '							

Signatures

STOCK OPTION

Gary Smith	07/14/2005	
**Signature of Reporting Person	Date	

Reporting Owners 2

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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)
 - Stock Performance Unit granted pursuant to The Andersons, Inc. Plan. Units vest 100% in 3 years contingent on cumulative EPS from
- (2) 1/1/2005 to 12/31/2007. Number of underlying shares are determined by the three-year 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.