## Edgar Filing: lynch james edward - Form 4

lynch james e	dward										
Form 4	-										
April 29, 2013									PPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								л	PPROVAL		
Washington, D.C. 20549							Number:	3235-0287			
Check this if no longe subject to	r	X STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							January 31, 2005 average		
Section 16		SECURITIES						Estimated average burden hours per			
Form 4 or Form 5								response	0.5		
obligations							ge Act of 1934,	~ *			
may contin	nue. Section 17			•	<b>.</b>	Act of 19	of 1935 or Section 40	511			
See Instruct 1(b).	ction	50(11)	or the my	vestillent v	company		10				
(Print or Type Re	esponses)										
1 NT 1 A 1		D *					5 0 1 ( 1 1	CD (° D			
1. Name and Ad lynch james e	2. Issuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer						
Tynen junes (	Cawara		•	Symbol ARTS WAY MANUFACTURING							
			CO INC [ARTW]				(Check all applicable)				
(Last)	(First)	(Middle)					_X_ Director	109	6 Owner		
			3. Date of Earliest Transaction (Month/Day/Year)				Officer (give title Other (specify				
20331 FULLBRIGHT PLACE			04/25/2013				below) below)				
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				Filed(Month/Day/Year)				Applicable Line)			
CHATSWOR	RTH, CA 9131	1					_X_ Form filed by Form filed by Person	One Reporting Pe More than One Re			
(City)	(State)	(Zip)	Table	I New D				f an Danafiaiai	lles Oeren al		
							quired, Disposed o		•		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executionany	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	<ul><li>(A)</li><li>or</li><li>(D) Price</li></ul>	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock							11,600	D			

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.

 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)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Dat (Month/Day/Y	te	7. Title and A Underlying S (Instr. 3 and	Securities	8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 8.66					04/28/2011	04/28/2021	Common Stock	2,000	
Stock Option (Right to Buy)	\$ 6.75					04/26/2012	04/26/2022	Common Stock	2,000	
Stock Option (Right to Buy)	\$ 6.4	04/25/2013		А	2,000	04/25/2013	04/25/2023	Common Stock	2,000	

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## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	lips		
	Director	10% Owner	Officer	Other	
lynch james edward 20331 FULLBRIGHT PLACE CHATSWORTH, CA 91311	Х				
Signatures					
/s/ Elizabeth M. Dunshee as attorney-in-fact for James E. Lynch pursuant to power of attorney previously filed. 04/29/2013					

**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).

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.