FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

ington, D.C. 20549	OMB APPROVAL

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hours per response:	0.5						

#### Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*  KINCAID STEVEN M					2. Issuer Name <b>and</b> Ticker or Trading Symbol  LA-Z-BOY INC [LZB]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
KINCAID STEVEN W															Director			10% Ow	ner	
(Last)	(E	iret)	(Middle)		Date of Earliest Transaction (Month/Day/Year)								X	Officer (	give title		Other (s below)	pecify		
					03/0	1/2	012							Senior Vice President						
1284 N. TELEGRAPH ROAD																				
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
MONROE MI 48162					00/00/2012									X Form filed by One Reporting Person						
WOTAKOL WII 40102															Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)												Person					
		Та	ıble I - Non	-Deriva	tive	Se	cur	ities Ac	quired,	Dis	posed of,	or Be	nefic	ially	Owned					
1. Title of Security (Instr. 3) 2. Transa											3. 4. Securities Acquired (A)					of	6. Ownership		7. Nature of	
		•		Date	Execution Date, if any (Month/Day/Year)									and 5)				Form: Direct Indirect Bene		
			- 1	(WIOTILITIE)						unsu.					Owned Fo				Beneficial Dwnership	
					( , , , , , , , , , , , , , , , , , , ,					Amount (A) or Br				Reported	,n/o)		. (	Instr. 4)		
									Code	l۷	Amount	(A) 01	Pr	ice	Transaction(s) (Instr. 3 and 4)					
			Table II D			`		: ^	uiuaal E	.:		D	. e: - : -	- 11 6	a al					
			Table II - D												wnea					
			(0	e.g., pu	its, c	can	s, w	varrants	, optioi	ns, c	onvertibl	e secu	ritie	S)						
1. Title of Derivative Conversion or Exercise Price of Derivative Conversion or Derivative Security (Instr. 3)			3A. Deemed Execution Date if any (Month/Day/Ye	Cod	Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed		6. Date E Expiration (Month/E	n Date		and 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned	s	10. Ownership Form: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)	
	Security						of (D	) (Instr. 3,	(,						Following Reported Transaction(s)		(I) (Instr. 4)			
				<u> </u>		4 and 5)														
											Am or	ount		(Instr. 4)						
														Number					1	
				Cod	le V		(A)	(D)	Date Exercisa	ble	Expiration Date	Title	of Sha	ares						
Stock Option (right to buy)	\$11.45	03/01/2012		М				18,502 <sup>(1)</sup>	07/11/20	08 <sup>(2)</sup>	07/11/2012	Commor Shares	18	,502	\$11.45	4,098	3	D		
Stock Option (right to buy)	\$11.45	03/02/2012		M				4,098 <sup>(1)</sup>	07/11/20	08 <sup>(2)</sup>	07/11/2012	Commor Shares	4,	098	\$11.45	0		D		
Stock Option (right to buy)	\$4.37	03/02/2012		М				1,202 <sup>(1)</sup>	07/08/20	10 <sup>(2)</sup>	07/08/2014	Commor Shares	1,	202	\$4.37	122,84	48	D		

### Explanation of Responses:

- 1. This amended Form 4 is filed to show the derivative securities as disposed of in Column 5.
- 2. These were granted under the 2004 Long-Term Equity Award Plan and become exercisable in four equal annual installments beginning on the date shown in the Date Exercisable column.

## Remarks:

<u>James P. Klarr</u> 03/19/2012

\*\* Signature of Reporting Person Date

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

- \* 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.

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 Number.