FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
|---------------|------|-------|
|---------------|------|-------|

OMB APPROVAL OMB Number: Estimated average burden 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).

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

| 1. Name and Address of Reporting Person* RICCIO LOUIS M JR | | | | | | 2. Issuer Name and Ticker or Trading Symbol LA-Z-BOY INC [LZB] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issu (Check all applicable) Director 10% Ow X Officer (give title Other (sp | | | | | vner | |
|--|---|--|---|---------|---|--|---|------|--|---------------|--|------------------|---|-----|--|---|--|---|-------------------------------------|--|--|--|
| (Last) 1284 N. | (Fi | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/16/2010 | | | | | | | | | | | below) | | P and | Other (s below) | вреспу | |
| (Street) MONRO (City) | | | 48162 (Zip) | | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Indiv ne) X | , | | | | | |
| | | Tab | le I - Nor | า-Deriv | ative/ | Se | curitie | s Ac | qui | ired, [| Disp | osed c | of, or | Ben | eficia | ally | Owned | ı | | | | |
| 1. Title of Security (Instr. 3) 2. Transc Date (Month/L | | | | | | ar) l | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | | 4 and Securiti Benefic Owned | | es ally Following | Form (D) o | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | Ī | Code | v | Amount | | A) or D) | Price | Reporte Transac (Instr. 3 | | tion(s) | | | (Instr. 4) | | | | |
| Common | Shares | 08/16 | 6/2010 | 2010 | | | | F | | 435 | | D | \$7. | 15 | 49 | ,111 | | D | | | | |
| Common Shares | | | | | | | | | | | | | | | | | 1,477 | | | | by 401(k) | |
| 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. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | | 7. Title and Amount of Securities Underlying Derivative Secui (Instr. 3 and 4) | | | Di Si | Price of erivative ecurity 1str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exe | e rcisable | | xpiration ate | Title | 1 | Amount or Number of Shares | | | | | | | |
| Employee Stock Options (right to | \$7.75 | 08/18/2010 | | | J ⁽¹⁾ | | 9,989 | | 07/ | 14/2011 | 07 | //14/2020 | Comr Shar | | 9,989 | | \$7.75 | 9,989 | | D | | |

Explanation of Responses:

1. These options were granted on 7/14/2010, contingent upon shareholder approval of the La-Z-Boy Incorporated 2010 Omnibus Incentive Plan, which occurred on 8/18/2010. The options become exercisable in four equal installments beginning on the date shown in the Date Exercisable column.

Remarks:

James P. Klarr, Attorney in 08/18/2010 <u>Fact</u>

** 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.