Sparks Tamara Sue Form 4 February 28, 2013

FORM 4

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

OMB Number: 3235-0287 January 31,

5. Relationship of Reporting Person(s) to

600 (1)

570 (1)

D

D

Issuer

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: 2005
Estimated average burden hours per response... 0.5

OMB APPROVAL

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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

(Print or Type Responses)

Sparks Tamara Sue

STOCK

(2014)

PERFORMANCE

PERFORMANCE SHARE UNIT

SHARE UNIT

1. Name and Address of Reporting Person *

			ANDERSONS INC [ANDE]					(Check all applicable)			
· · · · · · · · · · · · · · · · · · ·	(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 480 W DUSSEL DR. 02/27/2013				Director 10% Owner X Officer (give title Other (specify below) VP,Corp.Relations/BusinessAnal						
2)	Street)		4. If Amendment, I	Č	al		6. Indiv	idual or Joint/Gro	oup Filing(Che	eck	
MAUMEE, OH 43537			_X_ Fo				_X_ For	rm filed by One Reporting Person rm filed by More than One Reporting Person			
(City) (S	State)	(Zip)	Table I - Non	-Derivativ	e Securitio	es Acq	uired, D	isposed of, or Be	neficially Ov	vned	
1.Title of Security (Instr. 3)		action Date Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	(A) or	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
COMMON STOCK	02/27/2	2013		Code V F	Amount 166	(D)	Price \$ 49.3	318.57	I	Held by Spouse	
COMMON STOCK	02/27/2	2013		M	320	A	\$ 11.02	638.57	I	Held by Spouse	
COMMON								3,848.03	D		

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PERFORMANCE SHARE UNIT (2014)	255.65 <u>(1)</u>	I	Held by Spouse
PERFORMANCE SHARE UNIT (2015)	320.98 (1)	I	Held by Spouse
PERFORMANCE SHARE UNIT (2015)	647 (1)	D	

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

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(9-02)

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)	Deri Secu Acq (A) (Disp of (I	vative arities uired or cosed O) r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
SOSAR	\$ 11.02	02/27/2013		M		320	03/02/2010	03/31/2014	COMMON STOCK	320
SOSAR	\$ 32.75						03/01/2011	04/01/2015	COMMON STOCK	850
SOSAR	\$ 32.75						03/01/2011	04/01/2015	COMMON STOCK	385
SOSAR	\$ 11.02						03/02/2010	03/31/2014	COMMON STOCK	720

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		

Reporting Owners 2 Sparks Tamara Sue 480 W DUSSEL DR. MAUMEE, OH 43537

VP,Corp.Relations/BusinessAnal

Signatures

Tamara Sparks, By: Mary J. Schroeder, Limited Power of Attorney

02/28/2013

**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).
- (1) Stock performance unit granted pursuant to The Andersons, Inc. Plan. Units vest 100% in 3 years contingent on cumulative EPS. 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.

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