Sparks Tamara Sue Form 4 August 05, 2009

FORM 4

Check this box

if no longer

subject to

Section 16.

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

OMB

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

STOCK

1. Name and Address of Reporting Person * Sparks Tamara Sue		2. Issuer Name and Ticker or Trading Symbol					,	5. Relationship of Reporting Person(s) to Issuer			
			ANDERSONS INC [ANDE]				(Check all applicable)				
(Last)	(First)	Middle)	3. Date of Earliest Transaction					••			
480 W DUSS	EL DR.		(Month/Day 08/04/200						Director _X Officer (give lelow) VP,Corp.Re		Owner or (specify ssAnal
(Street) 4. I		4. If Amend	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Month	/Day/Yea	r)				Applicable Line)	n n	
MAUMEE, C						-	_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table 1	I - Non-l	Der	ivative Se	ecurit	ies Acqui	ired, Disposed of,	or Beneficiall	ly Owned
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execut any	eemed ion Date, if n/Day/Year)	3. Transac Code (Instr. 8		4. Securion(A) or Di (Instr. 3,	spose	d of (D)	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	08/04/2009			Code F	V	Amount 315	(D)	Price \$ 32.22	4,866.32	D	
COMMON STOCK	08/04/2009			M		466	A	\$ 15.5	5,332.32	D	

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

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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)	Orof Deri Secu Acq (A) Disp of (I	posed D) tr. 3, 4,	6. Date Exercis Expiration Dat (Month/Day/Y	e	7. Title and Amc Underlying Secu (Instr. 3 and 4)
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title
STOCK OPTION	\$ 15.5	08/04/2009		M		466	04/01/2005	03/31/2010	COMMON STOCK
PERFORMANCE SHARE UNIT	\$ 0 (1)						12/31/2010	01/01/2011	COMMON STOCK
PERFORMANCE SHARE UNIT	\$ 0 (2)						12/31/2011	01/01/2012	COMMON STOCK
SOSAR	\$ 11.02						03/02/2010	03/31/2014	COMMON STOCK
SOSAR	\$ 39.115						04/01/2009	04/01/2011	COMMON STOCK
SOSAR	\$ 42.3						03/01/2010	03/31/2012	COMMON STOCK
SOSAR	\$ 46.26						03/01/2009	04/01/2013	COMMON STOCK

Reporting Owners

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

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

VP,Corp.Relations/BusinessAnal

Signatures

Tamara Sparks	08/05/2009
**Signature of Reporting Person	Date

Reporting Owners 2

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).
- Stock performance unit granted pursuant to The Andersons, Inc. Plan. Units vest 100% in 3 years contingent on cumulative EPS from (1) 1/1/2008 to 12/31/2010. Number of underlying shares are determined by the three-year cumulative fully diluted EPS for the performance
- Stock Performance Unit granted pursuant to The Andersons, Inc. Plan. Units vest 100% in 3 years contingent on cumulative EPS from (2) 1/1/2009 to 12/31/2011. 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.