## Edgar Filing: WHITE RICHARD - Form 4

WHITE RIC	HARD										
Form 4											
July 16, 2012	2										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OND	3235-0287		
Check thi	Check this box Washington, D.C. 20549							Number:			
if no longer				GES IN BENEFICIAL OWNE SECURITIES					Expires:	January 31, 2005	
								NERSHIP OF	Estimated a		
	Section 16.				TTES				burden hours per		
Form 4 or Form 5			G (* 1)	()	а ···		1	A ( C1024	response	0.5	
obligation		*		· · /				e Act of 1934,			
may conti								f 1935 or Section	n		
See Instru	iction	30(n)	of the In	vestment	Compan	y Aci	. 01 194	+0			
1(b).											
(Print or Type R	(esponses)										
(i fine of Type is	(esponses)										
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name <b>and</b> Ticker or Trading 5. Relationship of							5. Relationship of	Reporting Per	son(s) to		
WILLTE DICULADD			Symbol	i vuine <b>unu</b>	Tieker of	riadin	5	Issuer			
			•	ADE INC	[ESCA]	I					
( <b>T</b> )	(T) a				L .			(Chec	k all applicable	e)	
(Last)	(First)	(Middle)		Earliest Tra	ansaction						
C/O ESCAL	ADE		(Month/D	•				X_ Director 10% Owner Officer (give title Other (specify			
	ADE ATED, 817 N	AVWELL	07/13/20	)12				below)	below)	er (opeenig	
AVE	AIED, 017 I	VIAA W ELL									
AVL											
(Street) 4. If				ndment, Dat	-			6. Individual or Joint/Group Filing(Check			
Filed(Mon				th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
	LE DI 47711								Jne Reporting Pe Iore than One Re		
EVANSVIL	LE, IN 47711	L						Person		·r ·····8	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date 2A. Deemed			3. 4. Securities Acquired					6. Ownership		
Security	(Month/Day/Y	ear) Execution	on Date, if Transaction(A) or Disposed of				d of	Beneficially (			
(Instr. 3)		any (Month/	Code (D) (Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)			Beneficial Ownership	
		(INIOIIUI/	(Instr. 8) (Instr. 3, 4 and 5)					(Instr. 4)	(Instr. 4)		
								Reported			
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	07/12/2012			٨	1,926		\$	09 (02	D		
Stock	07/13/2012			А	(1)	А	5.84	98,602	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)

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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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	5. Date Exercisable and Expiration Date (Month/Day/Year)		e and int of lying ities 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / AddressRelationshipDirector10% OwnerOfficerOtherWHITE RICHARD<br/>C/O ESCALADE INCORPORATED<br/>817 MAXWELL AVE<br/>EVANSVILLE, IN 47711XYYYSignaturessYYYYYY/s/ Richard<br/>White07/16/2012YYYY

\*\*Signature of Reporting Person

## **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) The grant of stock is in lieu of cash compensation earned for services as a Director. The common stock is awarded pursuant to the Escalade Incorporated 2007 Incentive Plan.

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.