Johnson Schmidt Anthony D Form 4 May 02, 2013

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

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

obligations

SECURITIES 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

may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Johnson Schmidt Anthony D			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
			RAVEN INDUSTRIES INC [RAVN]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	Director 10% OwnerX_ Officer (give title Other (specify		
PO BOX 5107			05/01/2013	below) below) Division VP and GM		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
~~~~~~			Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
SIOUX FALI	S SD 571	17		rom med by more than one reporting		

#### SIOUX FALLS, SD 57117

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative	Secui	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	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	05/01/2013		M	2,400	A	\$ 12.255	15,402	D	
Common Stock	05/01/2013		F	876	D	\$ 33.55	14,526	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Person

#### Edgar Filing: Johnson Schmidt Anthony D - Form 4

#### 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)	Secu Acqu (A) o Disp (D)	orities aired or osed of r. 3, 4,	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option	\$ 12.26	05/01/2013		M		2,400	12/05/2009(1)	12/05/2013	Common Stock	4,800
Stock Option	\$ 15.03						12/04/2010(1)	12/04/2014	Common Stock	4,000
Stock Option	\$ 22.2						11/30/2011(1)	11/30/2015	Common Stock	4,000
Stock Option	\$ 30						12/06/2012(1)	12/06/2016	Common Stock	16,000
Stock Option	\$ 31.66						04/02/2013(1)	04/02/2017	Common Stock	12,000
Stock Option	\$ 32.85						03/25/2014(1)	03/25/2018	Common Stock	13,900

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Johnson Schmidt Anthony D PO BOX 5107 SIOUX FALLS, SD 57117			Division VP and GM					
Signatures								

/s/ Anthony D. Johnson 05/02/2013 Schmidt

**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).
- (1) Pursuant to Rule 16b-3(d). Right to buy. All options vest at the rate of 25% annually beginning on the date listed in Exercisable, column 6.

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.