## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549

STATEMENT	OF CHAN	IGES IN RE	NEFICIAL	OWNERSHIP
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**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* $\underline{Levine\ Thomas\ M}$					2. Issuer Name <b>and</b> Ticker or Trading Symbol FLEXSTEEL INDUSTRIES INC [ FLXS ]							(Che	elationship of the color of the	,					
(Last)	•	irst) (	(Middle)			B. Date of Earliest Transaction (Month/Day/Year) 12/09/2014								Officer below)	(give title		Other (s below)	specify	
(Street)  DUBUQ  (City)			52004 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Ac	quired,	Disp	osed c	of, or	Bene	ficiall	y Owned	i			
D			2. Trans Date (Month/i		ar)	Execution if any	A. Deemed Execution Date, f any Month/Day/Year)		Code (Instr. 5)						es Fo ially (D Following (I)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock												5,	5,500		D				
		Ţ	able II -						uired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution D ecurity or Exercise (Month/Day/Year) if any			Date,	Transaction of			6. Date Exercisable and Expiration Date (Month/Day/Year)  (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)				8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	OI N Of	umber					
Option 12/06/2010	\$17.23								12/06/201	0 1	2/06/2020	Comr		2,500		2,500		D	
Option 12/11/2012	\$19.72								12/11/201	2 1	2/11/2022	Comr		2,500		2,500		D	
Option 12- 10-2013	\$27.38								12/10/201	3 1	2/10/2023	Comr		2,750		2,750		D	
Option	\$32.13	12/09/2014			A		2,750		12/09/201	4 1	2/09/2024	Comr	non 2	2,750	\$32.13	2,750		D	

**Explanation of Responses:** 

Thomas M. Levine

12/10/2014

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).