FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

n, D.C. 20549	OMB APPROVAL
	,

OMB Number: 3235-0287 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* <u>CRAHAN PATRICK M</u>						2. Issuer Name and Ticker or Trading Symbol FLEXSTEEL INDUSTRIES INC [FLXS]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(Fii	rst) (3. Date of Earliest Transaction (Month/Day/Year) 06/12/2012									X Officer (give title Other (specify below) Vice President							
(Street)	UE IA	A 52004			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(St	ate) ((Zip)										Person							
			le I - No			_			-	Dis	posed o							1		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					4 and Securitie Benefici Owned I		s Ily	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D) Pri		Tra	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock															12,049		I		By Flexsteel Industries	
Common Stock															30,1	173		I	By Wife	
Common Stock 06/12/2					2/2012	2012			M/K		4,492(1	(1) A \$		2.5	105,198		D			
Common Stock 06/12/					2/2012	2012		S		1,431	,431 D S		0	103,767		D				
		Т	able II -								osed of, converti				ned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	ed n Date,	4. Transaction Code (Instr. 8)		5. Number n of		6. Date Ex Expiration (Month/Da	ercis	able and			1 8. Pr Deri		9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amour or Number of Shares	er						
Option 12/08/2003	\$19.21								12/08/200	3	11/25/2013	Common Stock	10,75	0		10,75	0	D		
Option 12/14/2004	\$16.49								12/14/200)4	12/14/2014	Common Stock	10,75	0		6,000		D		
Option 12/13/2005	\$14.4								12/13/200)5 :	12/13/2015	Common Stock	10,75	0		6,940		D		
Option 12/07/2009	\$8.42								12/07/200	9 :	12/07/2019	Common Stock	15,00	0		8,760		D		
Option 12/06/2010	\$17.23								12/06/201	.0	12/06/2020	Common Stock	5,000			5,000		D		
Option 12/12/2011	\$13.9								12/12/201	.1	12/12/2021	Common Stock	5,000			5,000		D		
Option 12/11/2006	\$12.65	06/12/2012			M/K			5,800	12/11/200	6	12/11/2016	Common Stock	10,00	0 \$1	2.65	0		D		
Option 12/10/2007	\$12.35	06/12/2012			M/K			6,200	12/10/200	7	12/10/2017	Common Stock	10,00	0 \$1	\$12.35 0			D		

Explanation of Responses:

1. Total option shares exercised 12,000 with a weighted average price of \$12.50. 7,508 shares with a market value of \$19.971 per share were surrendered to exercise the options. 4,492 additional shares were

Patrick Crahan

06/12/2012

** Signature of Reporting Person

Date

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

- * 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).

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.