MATHERNE ELIZABETH JEAN

Form 4

August 01, 2011

FORM 4

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

OMB Number:

3235-0287

2005

0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires:

OMB APPROVAL

Estimated average

burden hours per response...

subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

if no longer

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

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading MATHERNE ELIZABETH JEAN Issuer Symbol Lumber Liquidators Holdings, Inc. (Check all applicable) [LL] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X_ Officer (give title Other (specify (Month/Day/Year) below) below) 3000 JOHN DEERE ROAD 08/01/2011 SVP, Human Resources (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 **TOANO, VA 23168** Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Instr. 3, 4 and 5) Indirect (I) Ownership (Month/Day/Year) (Instr. 8) Owned Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Common 08/01/2011 P 4,000 A \$ 16 4,000 D Stock

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.

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 | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exer | cisable and | 7. Title an | nd 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|-------------------|--------------------------------------|-----------------|-------------|--------------|----------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | TransactionNumber | | Expiration D | ate | Amount o | of Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day | /Year) | Underlyin | ng Security | Secui |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative Securities Acquired | | Securities | (Instr. 5) | Bene | |
| | Derivative | | | | | | (Instr. 3 a | nd 4) | Owne | |
| | Security | | | | | | | | Follo | |
| | · | | | | (A) or | or | | | | Repo |
| | | | | | Disposed | | | | | Trans |
| | | | | | of (D) | | | | | (Instr |
| | (Instr. 3, | | | | | | | | | |
| | | | | | 4, and 5) | | | | | |
| | | | | | | | | A | | |
| | | | | | | | | | nount | |
| | | | | | | Date Expiration | | or | , | |
| | | | | | | Exercisable | Date | Title Number | mber | |
| | | | | | | | | of | | |
| | | | | Code V | (A) (D) | | | Sha | ares | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MATHERNE ELIZABETH JEAN 3000 JOHN DEERE ROAD TOANO, VA 23168

SVP, Human Resources

Signatures

/s/ E. Livingston B. Haskell, Power-of-Attorney

08/01/2011

**Signature of Reporting Person

Date

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).

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.

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