FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	mber:	3235-		

35-0287 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*  PORT RONALD B					LA	2. Issuer Name and Ticker or Trading Symbol  LAWSON PRODUCTS INC/NEW/DE/  LAWS ]									all appli Directo	cable) or	g Pers		vner
(Last) 1666 EA	(First) (Middle) AST TOUHY AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 05/10/2011									Officer (give title below)			Other (s below)	респу
	PLAINES IL 60018			-   4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)									ndividual or Joint/Group Filing (Check Applicate)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(:	•	(Zip)	Non-Deri	vative	Sac	uriti	ios A	cauire	24 D	ienosad o	of or B	enefici	ially (	Owner	ı			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N			ion	n 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amor Securiti Benefic Owned		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock, \$1	.00 par value		05/10/2	011				A		2,865(1)	A	\$0	)	720	0,540		D	
Common Stock, \$1.00 par value			05/10/2011				M		3,868(2)	A	\$0	)	724	4,408		D			
Common Stock, \$1.00 par value 0.			05/10/2011				D		3,868(2)	D	\$90,16	3.08	720	0,540		D			
Common Stock, \$1.00 par value													221	,836 <sup>(3)</sup>		I 1	In trusts.		
Common Stock, \$1.00 par value													4,803		803		I 1	By Wife	
		7	Table								sposed of				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	eemed tion Date, n/Day/Year)	4. Transa Code ( 8)		5. Number of		6. Date Expira (Mont	ation D		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	e V	(A)	(D)	Date Exercisable		Expiration Date	Title	Amour or Number of Shares	er					
Stock Units	(4)	05/10/2011			M			3,868	04/14/2011		04/14/2020	Commo	n 3,86	8	\$0 0			D	

## **Explanation of Responses:**

- 1. Represents a restricted stock award that will vest one year from the date of grant and which must be held until the earlier of (i) three years or (ii) the date the director no longer serves on the Board.
- 2. Reflects the payment in cash of the Stock Units referenced in Table II.
- 3. Reflects shares held in trusts for which the Reporting Person is a trustee. The Reporting Person disclaims beneficial interest in these shares except to the extent of his economic interest in the securities.
- 4. Stock Units were payable in cash or stock. On May 10, 2011, Board paid for the Stock Units in cash in the amount of \$90,163.08.

/s/ Ronald B. Port

05/12/2011

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.