FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | 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 | nd Address of J STEVE | | 2. Issuer Name and Ticker or Trading Symbol OIL DRI CORP OF AMERICA [ODC] | | | | | | | | | | Relationship neck all appl X Direct | icable) | ng Per | son(s) to Iss | | | | |
|---|--|--|--|--|--|---|---|-------|------------|---------------------------------|---------------|------------------|--|---|---|---|--|--------------------|--|--|
| | ASSOCIA | TES | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/05/2011 | | | | | | | | | Office below | r (give title) | | Other (s below) | specify | |
| 633 SKC | KIE BOUI | LEVARD, SUIT | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) NORTHBROOK IL 60062 | | | | | | | | | | | | | - 1 | X Form | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | | | | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| D | | | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Yea | | · | 3. Transa Code (I 8) | | | | | | Benefic | es ially Following | Form (D) o | n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transac | Transaction(s) (Instr. 3 and 4) | | | (1115411 4) | | | |
| Common | 10/0 | 5/2011 | | | | | M | | 6,25 | 0 | A | \$4.9 | 2 26,636 | | D | | | | | |
| Common Stock | | | | | | | | | | | | | | | | 1, | ,208 | | I | Owned By Spouse |
| | 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 I if any (Month/Day | Date, | | ransaction Code (Instr. | | | | Date Exe piration onth/Da | Date | | 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | e G | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Dai Exc | te ercisabl | | xpiration ate | Title | 1 | Amount or Number of Shares | | | | | |
| Stock Options (Right to Buy) | \$4.92 | 10/05/2011 | | | M ⁽¹⁾ | | | 6,250 | 10 |)/12/2002 | 2 1 | 0/12/2011 | Comi | | 6,250 | \$0 | 0 | | D | |

Explanation of Responses:

1. Exercise of director stock options pursuant to the Oil-Dri Corporation of America Outside Director Stock Plan in a transaction exempt under rule 16b-3.

/s/ Angela M. Hatseras by
Power of Attorney

10/07/2011

** 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.