FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|------------|---------------|------------------|

| ı | OMB APPROVAL | | | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | | |
| ı | 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* TOMPKINS NICHOLAS | | | | 2. Issuer Name and Ticker or Trading Symbol LANDEC CORP \CA\ [LNDC] | | | | | | | | | k all applica Director | , | | 10% Ow | ner | |
|---|---|--|---|--|--------------------------------|-------------------------------------|----------------------|--|-------------------------------------|---|--------------------------|---|--|---|---|--|--|--|
| | ` | First) RPORATION NUE | (Middle) | | 07/22/ | 2009 | 1 | | action (Month/Day/Year) | | | | | below) `` | (give title | | Other (specify below) | |
| (Street) MENLO (City) | PARK C | | 94025 (Zip) | | 4. If Am | endm | ent, Date | of O | riginal F | iled (| Month/Day/Y | 'ear) | 6. Ind Line) | | ed by One | Repor | Check Appl ting Person One Reporti | |
| | | Ta | able I - Non | n-Deriva | tive S | ecu | rities A | cqu | uired, I | Disp | osed of, | or Bene | ficially | Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trai | | 2. Transa Date | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. 4. Transaction Code (Instr. | | 4. Securitie | 4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a | | 5. Amount of Securities Beneficially Owned 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 Transactio (Instr. 3 ar | | | [| Instr. 4) |
| Common Stock 07/2 | | | 07/22/ | :/2009 | | М | | 1,667 | A | (1) | 79,003 | | | | Held by Trust | | | |
| Common Stock | | | | | | | | | | | | | 600 | | | I 1 | Held by Minor Children | |
| | | | Table II - I | | | | | | | | sed of, o onvertible | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date if any (Month/Day/Yes | Cod | saction e (Instr. | Deri Sec Acq or D of (I | Derivative | | Date Exer piration I onth/Day | Date | | 7. Title and Amount of Securities Underlying Derivative (Instr. 3 ar | f G Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Followin | e Or s Fo ally Di or g (I) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | e V | (A) | (D) | Dat Exe | te ercisable | | expiration pate | Title | Amount or Number of Shares | | Transacti (Instr. 4) | .1011(5) | | |
| Restricted Stock Units | (1) | 07/22/2009 | | М | | | 1,667 ⁽²⁾ | 07/ | 22/2009 ⁽ | 3) 0 | 7/22/2009 ⁽³⁾ | Common Stock | 1,667 | \$0.00 | 0 | | D | |

Explanation of Responses:

- 1. The restricted stock units convert into common stock of Landec Corporation on a 1 for 1 basis.
- 2. The restricted stock units were granted on July 22, 2008.
- 3. The restricted stock units vested on July 22, 2009

/s/ Stacia Leigh Skinner by power of attorney 07/23/2009

** 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.