FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
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hours per response:

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* HICKS WAYLAND R | | | | SC | 2. Issuer Name and Ticker or Trading Symbol SCHNITZER STEEL INDUSTRIES, INC. [SCHN] | | | | | | | | | | tionship of Reportin all applicable) Director Officer (give title | | 109 | o Issuer o Owner er (specify | |
|--|---|----|---|----------------|---|--|-----------------------------------|--------------------|--|-------|----------------------|--|------------------|---|--|---|---|---|---|
| (Last) (First) (Middle) 299 SW CLAY STREET SUITE 350 | | | | 02/ | 3. Date of Earliest Transaction (Month/Day/Year) 02/25/2019 | | | | | | | | | belov | w) `` | belo | ow) | | |
| (Street) PORTLAND OR 97201 | | | | - 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indi Line) | ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (St | | Zip) | | | | | | | | | | | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | action | ction 2A. Deemed Execution Date, | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | or | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Pri | ce | | ted action(s) 3 and 4) | | (Instr. 4) |
| Class A Common Stock 02 | | | | 02/25 | 5/2019 | | | | A ⁽¹⁾ | | 548.915 | | A | \$2 | 25.04 7 | | 057.669 | I | See Note ⁽²⁾ |
| Class A Common Stock | | | | | | | | | | | | | | | | | 500 | I | By Spouse |
| Class A Common Stock | | | | | | | | | | | | | | | | 1,000 | I | See Note ⁽³⁾ | |
| Class A Common Stock | | | | | | | | | | | | | | 5,600 | | D | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | | wned | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution Date, if any | | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date E Expiratio (Month/E | n Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) | | of s ng e (Instr. | Deri Sec (Ins | curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) |
| | | | Code | code V (A) (D) | | | | Expiration Date | of | | lumbe f Shares | | | | | | | | |

Explanation of Responses:

- 1. Deemed reinvestment of dividends under the issuer's Deferred Compensation Plan for Non-Employee Directors.
- 2. Deferred Shares that have been or will be credited to the reporting person's account under the issuer's Deferred Compensation Plan for Non-Employee Directors.
- 3. Shares are held by Cynthia M Lybrand, Trustee of the Hicks Surviorship Fund of the 2003 Dynasty Trust.

Remarks:

Joseph J. Bradley, Attorney-in-

02/27/2019

** 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.