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, DC 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden
hours per response......0.5

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

(Print or Type Responses)

1. Name and Address of Reporting Person*		2. Issuer Name and Ticker or Trading Symbol							6. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
			Museus Industries Inc (MVF)					X	Director		10% Owner				
	Myers Industries, Inc (MYE)							Officer (give title below)		Other (specify below)					
Kane,	Michael	W													
(Last)	(First)	(Middle)	3. I.R.S. Ider Number of Person, if a	Reporting	4	4. Statement for Month/Day/Year 04/23/2003				7. Individual or Joint/Group Filing (Check Applicable Line)					
10877 Wilshire Blve. Suite 603			(Voluntary)			5. If Amendment, Date of Original (Month/Day/Year)				Form filed by One Reporting Person					
(Street)										Form filed by More than One Reporting Person					
Los Angeles CA 90024-9998															
(City)	(State)	(Zip)	Table I — Non-Derivative Securities Acqu							uired, Disposed of, or Beneficially Owned					
(City)	(State)	(Zip)			1 40	16 I — N	iii-Derivative Sec	urities Acq	luii eu, D	disposed of, of Beneficially	Owneu				
1. Title of Security (Instr. 3)	(State)	(Zip)	2. Trans- action Date	2A. Deemed Execution Date, if	3. Transaction Code (Instr.8		4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)		jun eu, D	5. Amount of Securities Beneficially Owned	Owned	6. Owner- ship Form: Direct	7. Nature of Indirect Beneficial Owner-		
1. Title of Security	(State)	(Zip)	action	Deemed Execution	3. Trans- action Code		4. Securities Acquired or Disposed of (D)		Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Owned	6. Owner- ship Form:	Indirect Beneficial		
1. Title of Security	(State)	(ЕПР)	action Date (Month/ Day/	Deemed Execution Date, if any (Month/ Day/	3. Transaction Code (Instr.8	3)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)	(A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Owned	6. Owner-ship Form: Direct (D) or Indirect (I)	Indirect Beneficial Owner- ship		
1. Title of Security	(State)	(Zip)	action Date (Month/ Day/	Deemed Execution Date, if any (Month/ Day/	3. Transaction Code (Instr.8	3)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)	(A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Owned	6. Owner-ship Form: Direct (D) or Indirect (I)	Indirect Beneficial Owner- ship		
1. Title of Security	(State)	(Z-Ip)	action Date (Month/ Day/	Deemed Execution Date, if any (Month/ Day/	3. Transaction Code (Instr.8	3)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)	(A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Owned	6. Owner-ship Form: Direct (D) or Indirect (I)	Indirect Beneficial Owner- ship		
1. Title of Security	(State)	(Z-Ip)	action Date (Month/ Day/	Deemed Execution Date, if any (Month/ Day/	3. Transaction Code (Instr.8	3)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)	(A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Owned	6. Owner-ship Form: Direct (D) or Indirect (I)	Indirect Beneficial Owner- ship		
1. Title of Security	(State)	(ZIP)	action Date (Month/ Day/	Deemed Execution Date, if any (Month/ Day/	3. Transaction Code (Instr.8	3)	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)	(A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Owned	6. Owner-ship Form: Direct (D) or Indirect (I)	Indirect Beneficial Owner- ship		

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

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 control number. (Over) SEC 1474 (9-02)

FORM 4 (continued)

Table II — Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

^{*} If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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/ Year)	4. Transaction Code (Instr.8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Deriv- ative Secur- ity	9. Number of deriv- ative Secur- ities Bene-	10. Owner-ship Form of Deri- vative Security:	11. Nature of Indirect Benefi- cial Owner-
				Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of Shares	(Instr. 5)	ficially Owned Follow- ing Reported Trans- action(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	ship (Instr. 4)
Option/Right to Buy (1)	10.40							4/26/02	4/26/06	Common	1,375				
Option/Right to Buy (2)	9,99							4/23/04	4/23/13	Common	1,000				

Explanation of Responses:

see Instruction 6 for procedure.

- (1) Grants were issued under Myers Industries, Inc. 1992 Incentive Stock Option Plan.
- (2) Grants were issued under Myers Industries, Inc. 1999 Incentive Stock Plan

	/s/ Michael W Kane	4/23/2003
** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.	**Signature of Reporting Person	Date
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,		

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.