**HAWKINS INC** Form 4 April 03, 2017

## FORM 4

### **OMB APPROVAL**

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2005 Estimated average

**SECURITIES** 

burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

| porting Person * | 2. Issuer Name <b>and</b> Ticker or Trading Symbol HAWKINS INC [HWKN] | 5. Relationship of Reporting Person(s) to<br>Issuer  (Check all applicable)   |  |  |  |
|------------------|---|---|--|--|--|
| (Middle)         | 3. Date of Earliest Transaction                                       |   |  |  |  |
|                  | (Month/Day/Year)  | Director 10% Owner  |  |  |  |
|                  | 03/30/2017  | _X_ Officer (give title Other (specify below) VP, CFO, & Treas  |  |  |  |
|                  | 4. If Amendment, Date Original  | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person |  |  |  |
| 13               | Filed(Month/Day/Year)   |   |  |  |  |
|                  | oorting Person * (Middle)   | Symbol HAWKINS INC [HWKN]  3. Date of Earliest Transaction (Month/Day/Year) 03/30/2017  4. If Amendment, Date Original Filed(Month/Day/Year)  |  |  |  |

| (City)                               | (State)                                 | (Zip) Table   | e I - Non-D                             | erivative                             | Secur            | rities Acq  | uired, Disposed o  | f, or Beneficial   | ly Owned  |
|--------------------------------------|---|---|---|---------------------------------------|------------------|-------------|--|--|---|
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code<br>(Instr. 8) | 4. Securi<br>on(A) or D<br>(Instr. 3, | ispose           | d of (D)    | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|                                      |   |   | Code V                                  | Amount                                | (A)<br>or<br>(D) | Price       | Reported<br>Transaction(s)<br>(Instr. 3 and 4)                   |  |   |
| Common<br>Stock                      | 03/30/2017                              |   | F                                       | 1,899                                 | D                | \$<br>48.45 | 20,298.036   | D  |   |
| Common<br>Stock                      |   |   |   |                                       |                  |             | 1,224.3836   | I  | By ESOP<br>Trustee                                    |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

### Edgar Filing: HAWKINS INC - Form 4

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

|                     | 1. Title of Derivative | 2. Conversion                                     | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4.<br>Transacti | 5.<br>orNumber | 6. Date Exerc<br>Expiration D |                    | 7. Title                                  |  | 8. Price of Derivative | 9. Nu<br>Deriv  |
|---------------------|------------------------|---|--------------------------------------|-------------------------------|-----------------|----------------|-------------------------------|--------------------|---|--|------------------------|---|
| Security (Instr. 3) |                        | or Exercise<br>Price of<br>Derivative<br>Security | (World Day Tear)                     | any (Month/Day/Year)          | Code (Instr. 8) | of             | (Month/Day/Year)              |                    | Underlying<br>Securities<br>(Instr. 3 and | ying<br>ies                            | Security (Instr. 5)    | Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|                     |                        |   |                                      |                               | Code V          | (A) (D)        | Date<br>Exercisable           | Expiration<br>Date | Title N                                   | Amount<br>or<br>Number<br>of<br>Shares |                        |   |

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

Pepski Kathleen P. 2381 ROSEGATE

VP, CFO, & Treas

ROSEVILLE, MN 55113

## **Signatures**

/s/ Joshua L. Colburn, Attorney-in-Fact

04/03/2017

Date

\*\*Signature of Reporting Person

# **Explanation of Responses:**

- 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. 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.

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