## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
	235-0287								
Estimated average burden									
hours per response:	0.5								

U obligati	ons may contir tion 1(b).		ed pursual	pursuant to Section 16(a) of the Securities Exchange Act of 1934									ho	ours per	response:	0.5			
Name and Address of Reporting Person* <u>Keller Thomas J.</u>						or Section 30(h) of the Investment Company Act of 1940  2. Issuer Name and Ticker or Trading Symbol  HAWKINS INC [ HWKN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle) 2381 ROSEGATE					3. Date of Earliest Transaction (Month/Day/Year) 11/13/2017								X Officer (give title Other (spec below) below)  VP - Water Treatment Group						
(Street) ROSEVILLE MN 55113 (City) (State) (Zip)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								G. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tabl	e I - No	n-Deriv	ative S	Securi	ties Ac	quired	, Dis	posed o	of, o	r Bei	nefici	ally Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		Transaction Disposed Code (Instr. 5)			ties Acquired (A) o d Of (D) (Instr. 3, 4					Fo (D	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount		(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)	
Common Stock 11/13/2					/2017			G	v	135		D	\$	19,8	309.153 <sup>(</sup>	(1)	D		
Common Stock 04/04/					/2018			F		1,188		D	\$32	.75 18	18,621.153		D		
Common Stock														36,108.7757		57	I	By ESOP Trustee	
		Та								osed of, onvertil				y Owned	I				
Derivative Conversion Date Security Or Exercise (Month/Day/Year) if		3A. Deem Execution if any (Month/D	n Date, Transaci Code (In		ion of str. Do Si Ai (A Di of	on of		6. Date Exercisable and Expiration Date (Month/Day/Year)				d f g nstr. 3	8. Price of Derivative Security (Instr. 5)			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Date

Exercisable

Expiration

## **Explanation of Responses:**

1. Includes 21.597 shares acquired in October 2017 pursuant to the Issuer's dividend reinvestment plan.

/s/ Joshua L. Colburn, 04/06/2018 Attorney-in-Fact

\*\* Signature of Reporting Person Date

Number

of Shares

Title

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).

Code

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.