FORM 4

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject

OMB APPROVAL						
OMB Number: 3235-0287						
Estimated average burden						
hours per response: 0.5						

Beneficial Ownership (Instr. 4)

Form: Direct (D)

or Indirect

(I) (Instr. 4)

									-						
Name and Address of Reporting Person* Tang Yi					2. Issuer Name and Ticker or Trading Symbol HAWKINS INC [HWKN]					(Ch	Relationship of Reporting Person (Check all applicable) X Director			n(s) to Issuer 10% Owner	
(Last) 2381 RC	st) (First) (Middle) 81 ROSEGATE				3. Date of Earliest Transaction (Month/Day/Year) 10/21/2020						Office below	er (give title v)	Other below	(specify	
(Street) ROSEVILLE MN 55113 (City) (State) (Zip)				4. 1	If Amendr	ment, Date of	Original	Filed	(Month/Day	Year)	Line	e) <mark>X</mark> Form	filed by On	p Filing (Check e Reporting Per re than One Re	son
		Table	I - Non-D	Perivative	e Secur	rities Acq	uired,	Disp	osed of,	or Ben	eficia	lly Own	ed		
Date			Transaction	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			d (A) or	, 4 and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
				ate Ionth/Day/Yea	ear) if an	y	Code (I		Disposed O			Securii Benefi Owned	ties cially Following	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
					ear) if an	y	Code (I		Disposed O			Securii Benefi Owned Report Transa	ties cially Following	Form: Direct (D) or Indirect	of Indirect Beneficial
Common	Stock	·	(M		ear) if any (Mor	y	Code (I 8)	nstr.	Disposed O	f (D) (Insti	r. 3, 4 an	Securii Benefii Owned Report Transa (Instr. :	ties cially Following ed ction(s)	Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
Common	Stock	Ta	ble II - De	10/21/2020	ear) if any (Mor	y	Code (I 8) Code A	v ispo	Amount 719 psed of, o	(A) or (D) A r Bene	Price \$0	Securit Benefit Owned Report Transa (Instr. :	ties cially Following ed ction(s) 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership

Explanation of Responses:

or Exercise Price of Derivative

Security

Security (Instr. 3)

(Month/Day/Year

/s/ Joshua L. Colburn, 10/23/2020 Attorney-in-Fact

Securities

Derivative

Title

Underlying

Security (Instr. 3 and 4)

Amount Number

Shares

** Signature of Reporting Person Date

Security (Instr. 5)

Securities Beneficially

Owned

Following Reported

Transaction(s) (Instr. 4)

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

if any (Month/Day/Year)

- * 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 (Instr.

8)

Code

Derivative

Securities Acquired

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

(A) (D) (Month/Day/Year)

Date

Exercisable

Expiration

Date

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.