FORM 4

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

| Machinatan  | D C  | 20540 |  |
|-------------|------|-------|--|
| Nashington, | D.C. | 20049 |  |

| STATEMENT | OF ( | CHANGES | IN BE | NEFICIAL | <b>OWNERSHIP</b> |
|-----------|------|---------|-------|----------|------------------|

| OMB APPROVAL             |  |  |  |  |  |  |  |  |  |  |
|--------------------------|--|--|--|--|--|--|--|--|--|--|
| OMB Number: 3235-0       |  |  |  |  |  |  |  |  |  |  |
| Estimated average burden |  |  |  |  |  |  |  |  |  |  |
| hours per response:      |  |  |  |  |  |  |  |  |  |  |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person*     Moran Theresa R   |  |         |                 |   | 2. Issuer Name and Ticker or Trading Symbol HAWKINS INC [ HWKN ] |       |            |   |                 |       |   |              | (Chec   | k all app<br>Direc                        | tor   |  | 10% O              | wner                                  |            |  |  |
|---|--|---------|-----------------|---|--|-------|------------|---|-----------------|-------|---|--------------|---|---|---|--|--------------------|---------------------------------------|------------|--|--|
| (Last)<br>2381 RO   | (Fii   | rst) (M | ) (Middle)      |   |  |       |            | 3. Date of Earliest Transaction (Month/Day/Year) 04/06/2022 |                 |       |   |              |   |   |   | X Officer (give title Other (specifically)  VP - PURCHASING, LOGISTICS   |                    |                                       |            |  |  |
| (Street) ROSEVI (City)  |  |         | 5113<br>Zip)    |   | 4. If <i>F</i>   |       |            |   |                 |       |   |              |   |   |   | Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |                    |                                       |            |  |  |
|   |  | Table   | I - Non         | -Deriva                                 | tive S   | Secui | rities     | Acq   | uired,          | Dis   | posed of  | , or B       | enefi   | icially                                   | / Own   | ed   |                    |                                       |            |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da  |  |         | Execution Date, |   | Transaction Disposed Code (Instr. 5)                             |       | Disposed C | es Acquired (A) o<br>Of (D) (Instr. 3, 4                    |                 |       | Beneficially<br>Owned Following   |              | Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |                    |                                       |            |  |  |
|   |  |         |                 |   |  |       |            |   | Code            | v     | Amount  | (A) o<br>(D) | Pri   | ice                                       | Reported Transaction(s) (Instr. 3 and 4)            |  |                    |                                       | (Instr. 4) |  |  |
| Common Stock 04/06/   |  |         |                 | 04/06/2                                 | 022  |       |            | F   |                 | 2,196 | D   | \$4          | 42.57   | 44,874.6 <sup>(1)</sup>                   |   |  | D                  |                                       |            |  |  |
| Common Stock  |  |         |                 |   |  |       |            |   |                 |       |   |              |   | 52,                                       | ,291.2  |  | I                  | By<br>ESOP<br>Trustee                 |            |  |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |         |                 |   |  |       |            |   |                 |       |   |              |   |   |   |  |                    |                                       |            |  |  |
| 1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date Execution Date, if any (Month/Day/Year) |  |         | n Date,         | 4.<br>Transaction<br>Code (Instr.<br>8) |  |       |            | 6. Date Exercisable and Expiration Date (Month/Day/Year)    |                 |       | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Inst<br>3 and 4) |              | De<br>Se<br>(In:                                  | Price of<br>rivative<br>curity<br>str. 5) |   | Ownershi<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. 4   | Ownership<br>Form: | Beneficial<br>Ownership<br>(Instr. 4) |            |  |  |
|   | n of Posnon  |         |                 |   | Code   | v     | (A)        | (D)   | Date<br>Exercis | able  | Expiration<br>Date  | Title        | Amous<br>or<br>Number<br>of<br>Shares             | er  |   |  |                    |                                       |            |  |  |

1. Includes 60.98 shares acquired June 2021-March 2022 pursuant to the Issuer's dividend reinvestment plan and 262 shares acquired June-December 2021 pursuant to the Issuer's employee stock purchase plan.

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

04/13/2022

\*\* 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.