FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Wa

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

•	-	J	_	١.,		_		4	_	O	_	J	J	
ıs	hine	atoi	n. l	D.	C. 2	054	9							

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average	hurden										

0.5

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

	nd Address o amp Jeff	2. Issuer Name and Ticker or Trading Symbol HAWKINS INC [HWKN]										all app Direc Office	tor er (give title	ng Pei	10% O	wner specify			
(Last) 2381 RO	3. Date of Earliest Transaction (Month/Day/Year) 05/18/2022									Α	EXI	v) ECUTIVE	VP.	below)					
(Street) ROSEVILLE MN 55113 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Indivine) X	′				
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	oosed of	or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date					Execution Date,				Disposed (curities Acquired (A) sed Of (D) (Instr. 3,		4 and Securi Benefi Owned		ies cially Following	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(IIISU. 4)
Common Stock 05/18/2						2022		A		14,603	A	. \$	\$0 78,		515.408		D		
Common Stock															957.3394			I	By ESOP Trustee
		Tal									osed of, o				Owne	d	,		
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		on Date, Transaction Code (Instr.		of Expiration			Date Exercisable and xpiration Date Month/Day/Year)			e and nt of ities lying itive ity (Instr. 4)	nt		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Code						Expiration	Number of Shares								

Explanation of Responses:

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

05/20/2022

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).