## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol HAWKINS INC [ HWKN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Stauber Daniel J						III WICH O HIVE [ HWICH ]								X	Direc	ctor	10%	Owner	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 11/06/2018								X	Office	er (give title v)	Othe belov	(specify y)	
2381 ROSEGATE					111/										VP - Health and Nutrition				
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
ROSEVILLE MN 55113													X	Form	son				
(City)	(Si	tate) (	Zip)												Form filed by More than One Reporting Person				
		Tabl	e I - N	Non-Deriv	ative	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or B	enefic	ially (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				Executi (ear) if any		eemed tion Date, h/Day/Year)		3. Transaction Code (Instr. 8)				d 5) Sec Ben Owi		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						•		Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)		(Instr. 4)		
Common Stock 11/06/201				)18	18			P		2,000	A	\$37.68	7.6899 <sup>(1)</sup>		93.971 <sup>(2)</sup>	D			
	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	3. Transaction Date (Month/Day/Year)	Execution Date, if any			sunsaction de (Instr. Servivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

1. Reflects the weighted average price of 2,000 shares of common stock of Hawkins Inc. purchased by the reporting person in multiple transactions on November 6, 2018 with purchase prices ranging from \$37.5934 to \$38.1147 per share. The reporting person undertakes to provide upon request by the U.S. Securities and Exchange Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased at each separate price.

2. Includes 8.581 shares acquired in September 2018 pursuant to the Issuer's dividend reinvestment plan and 433 shares acquired in June 2018 pursuant to the Issuer's employee stock purchase plan.

/s/ Joshua L. Colburn, 11/08/2018 Attorney-in-Fact

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.