FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

STATEMENT	OF	CHANGES	IN BE	NEFICIAL	OWNER	RSHIP

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

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* Oldenkamp Jeffrey P.					2. Issuer Name and Ticker or Trading Symbol HAWKINS INC [HWKN]							(Che	ck all app Direc	tor	ng Pei	10% O	wner		
(Last) 2381 RO	(Fi SEGATE	rst) (M	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/20/2021									X Officer (give title below) Other (specify below) Executive VP and CFO				эрсспу	
(Street) ROSEVI			5113 Zip)		4. If <i>F</i>	Line) X For								Form	l or Joint/Group Filing (Check Applicable rm filed by One Reporting Person rm filed by More than One Reporting erson				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transac Date (Month/Da	Execution Date,		Date,			Disposed (Securities Acquired (A sposed Of (D) (Instr. 3,					Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or P	rice	Transaction(s)				(111511. 4)
Common Stock 05/2				05/20/	2021				A		18,810	A		\$ <mark>0</mark>	66,515.79			D	
Common Stock														702.8276			I	By ESOP Trustee	
		Tal									osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution Date, icurrity or Exercise (Month/Day/Year) if any			saction le (Instr. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Di Si (II	Price of erivative ecurity 1str. 5)	derivative Securities	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	oer					

Explanation of Responses:

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

05/24/2021

** 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.

^{*} 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).