FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
houre por rosponso:									

Instruc	tion 1(b).			Filed						es Exchang npany Act o		934		Lilouis	perres	porisc.	0.5	
1. Name and Address of Reporting Person* Keller Thomas J.						2. Issuer Name and Ticker or Trading Symbol HAWKINS INC [HWKN]							5. Relationship of Reporti (Check all applicable) Director			10% Ov	vner	
(Last) (First) (Middle) 2381 ROSEGATE					3. Date of Earliest Transaction (Month/Day/Year) 05/20/2020								X Officer (give title Other (specify below) VP - Water Treatment Group					
(Street) ROSEVILLE MN 55113 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)							ne) X Form Form	′				
		Table	I - No	n-Deriva	tive S	ecuri	ties Acq	uired,	Disp	osed of	, or Be	nefici	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Day/Year) if		2A. Deemed Execution Date, f any (Month/Day/Year)			ies Acquired (A) Of (D) (Instr. 3, 4		nd Securit Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
							Code	v	Amount	(A) or (D)	Price	Report Transa (Instr. 3	ction(s)			(Instr. 4)		
Common Stock 0				05/20/)/2020			A		6,754	A	\$(31,698.715		D			
Common Stock													36,1	08.7757		I .	By ESOP Trustee	
		Tal	ole II -							sed of, o			lly Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		Transaction of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amount of Securities		8. Price of Derivative Security (Instr. 5)	rivative derivative curity Securities		0. Dwnership Form: Direct (D) Or Indirect O) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

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

Title

Amount or Number

of Shares

05/21/2020

** Signature of Reporting Person Date

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

Code

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.

(A) (D) Date Exercisable

Expiration Date

^{*} 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).