#### ASKREN STANLEY A

Form 4

December 05, 2017

#### FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

OMB 3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * ASKREN STANLEY A			Issuer Name and Ticker or Trading     Symbol     HNI CORP [HNI]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(====== an approacte)		
600 EAST SECOND STREET			(Month/Day/Year) 12/01/2017	X Director 10% Owner X Officer (give title Other (specify below) Chairman, President & CEO		
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
MUSCATINE, IA 52761			Filed(Month/Day/Year)			

	•					1	Person		
(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securii (A) or Di (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/01/2017		M		A	\$ 10.36	211,279.2604 (1)	D	
Common Stock	12/01/2017		S(2)(3)	3,021	D	\$ 35.073	208,258.2604	D	
Common Stock							10,063.71	I	Profit Sharing Retirement Plan
Common Stock							657	I	By Son (4)
							657	I	By Son (4)

Common Stock

1. Title of

buy)

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

3. Transaction Date 3A. Deemed

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SEC 1474

(9-02)

5. Number

6. Date Exercisable and

7. Title and Amou

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	xercise any Code Sec e of (Month/Day/Year) (Instr. 8) Acc vative (A) urity Dis (D)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		Underlying Securi (Instr. 3 and 4)		
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amor Nur of Shar
Non-qualifying employee stock option (right to	\$ 10.36	12/01/2017		M	4,762	02/23/2013	02/23/2019	Common Stock	4,1

Relationships

### **Reporting Owners**

Reporting Owner Name / Address	<b>--</b>						
	Director	10% Owner	Officer	Other			
ASKREN STANLEY A 600 EAST SECOND STREET MUSCATINE, IA 52761	X		Chairman, President & CEO				

### **Signatures**

/s/Julie Abramowski, By Power of Attorney

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).

12/05/2017

(1) The total reported in Column 5 includes reinvested dividends of 599.9761 shares acquired by the reporting person under the Corporations' Executive Deferred Compensation Plan on 12/1/2017.

Reporting Owners 2

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- (2) The sale was effected pursuant to a Rule 10b5-1 of the Securities and Exchange Act of 1934, as amended, and HNI's policies regarding stock transactions, including its insider trading policy.
- (3) Reflects the sale to cover exercise price of, and taxes related to, cashless exercise of stock options.
- (4) Reporting person disclaims beneficial ownership of these shares.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.