Edgar Filing: HNI CORP - Form 4

| HNI CORP | | | | | | | | | | | | |
|--------------------------------------------------------------|-----------------------------------------|------------------|-------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------|--------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------------------------------------|--|--|
| Form 4 | | | | | | | | | | | | |
| December 0 | 3, 2015 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OMB APPROVAL | | | | |
| | UNITED | STATES | | | AND EXCH , D.C. 2054 | | GE C | OMMISSION | OMB Number: | 3235-0287 | | |
| Check th if no lon subject t Section Form 4 d | CHAN | IGES IN SECUE | | IAL | VERSHIP OF | Expires: January 20 Estimated average burden hours per response | | | | | | |
| Form 5 obligation may con <i>See</i> Instr 1(b). | tinue. Section 17 | (a) of the P | ublic U | tility Hol | | any A | ct of | e Act of 1934, 1935 or Section 0 | | 0.5 | | |
| (Print or Type | Responses) | | | | | | | | | | | |
| Porcellato Larry B S | | | 2. Issuer Name and Ticker or Trading Symbol HNI CORP [HNI] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| | | | | f Earliest T | - | | | (Check all applicable) | | | | |
| (| | | (Month/Day/Year) 12/01/2015 | | | | | _X_Director10% Owner Officer (give titleOther (specify below)below) | | | | |
| | | | | nendment, Date Original Ionth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| MUSCATI | NE, IA 52761 | | | | | | | Form filed by Mo Person | ore than One Re | porting | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative Se | curitie | s Acqu | iired, Disposed of, | or Beneficial | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | 3. Transactic Code (Instr. 8) | 4. Securities on(A) or Dispo (Instr. 3, 4 an | sed of | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 12/01/2015 | | | Code V A | Amount 107.4183 | (D) A | Price \$ 0 (1) | (Instr. 3 and 4) 36,127.3046 | D | | | |

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: HNI CORP - Form 4

| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transac | 5. ionNum | ber | 6. Date Exercised Expiration D | | 7. Titl Amou | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------------|---------------------------------------------------|-----------------------------------------|-------------------------|--------------------|----------------------------------------------------------------|-----|--------------------------------|--------------------|----------------------------------------------|----------------------------------------|---------------------------------------|-----------------------------------------------------------|
| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | of Deriv Secu Acqu (A) c Disp of (D (Inst | • | | | Underlying Securities (Instr. 3 and 4) | | (Instr. 5) Be Ov Fo Re Tr | Secur Bene Owno Follo Repo Trans (Instr |
| | | | | Code V | 7 (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---------------------------------------------------------------------|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| Porcellato Larry B 408 EAST SECOND STREET MUSCATINE, IA 52761 | Х | | | | | | | |
| Signatures | | | | | | | | |
| Julie Abramowski, By Power of Attorney | | 12/03/2 | .015 | | | | | |
| **Signature of Reporting Person | | Date | e | | | | | |
| - · · · · · | | | | | | | | |

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).

(1) These shares are reinvested dividends acquired by the reporting person under the Corporation's Directors Deferred Compensation Plan.

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.