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Form 4	ON FARMS INC												
March 03, 2 FORM Check th if no lon subject t Section Form 4 of Form 5 obligation may con See Instri 1(b).	A 4 UNITED his box ger o 16. or Filed pu Section 17	MENT O	Wa F CHAN Section 1 Public U	Shing NGES SEC (6(a) c	ton, IN CUR of th Hole	, D.C. 20 BENEFI RITIES e Securit	549 ICIA ies E ipany	L OW	COMMISSION NERSHIP OF ge Act of 1934, of 1935 or Section 40	OMB Number: Expires: Estimated burden hou response	urs per		
(Print or Type 1. Name and A SANDERS	2. Issuer Name and Ticker or Trading Symbol SANDERSON FARMS INC						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last) 127 FLYN	^(First) Γ ROAD, P.O. E	irst) (Middle) [SAFM 3. Date o (Month/I D, P.O. BOX 988 02/24/2				ransaction			X Director 10% Owner X Officer (give title Other (specify below) below) CEO, Chairman of the Board				
Filed(M				f Amendment, Date Original ed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
LAUREL,]		(Zin)							Person				
(City)	(State)	(Zip)	Tab	le I - N	on-I				quired, Disposed of	, or Beneficia	lly Owned		
1.Title of Security 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			Date, if	Code (Instr.	8)	n(A) or Dis (D)	sposed	l of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Beneficial Direct (D) Ownership or Indirect (Instr. 4) (I) (Instr. 4)			
Common Stock	02/24/2017			G		27,532		\$ 0 (1)	735,141	D			
Common Stock									9,808	Ι	By spouse.		
Common Stock									100,534.9077	I	Allocated to Reporting Person's account in Issuer ESOP.		

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title Number			
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SANDERSON JOE F JR 127 FLYNT ROAD P.O. BOX 988 LAUREL, MS 39443	Х		CEO, Chairman of the Board					
Signatures								
/s/ D. Michael Cockrell, Attorney-in-Fact	03/03/2017							
**Signature of Reporting Person		Da	te					

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) The reported transaction was a gift. Thus, there was no price.

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.