#### SANDERSON FARMS INC

Form 4 July 03, 2017

## FORM 4

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

OMB Number: 3235-0287

Expires: January 31, 2005

**OMB APPROVAL** 

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 Fil obligations may continue. See Instruction

1. Name and Address of Reporting Person \*

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 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

SANDERSON FARMS INC

Symbol

[SAFM]

1(b).

**RIGNEY TIM** 

(Print or Type Responses)

				[SAI'W	.]								
	(Last) 127 FLYN7	(Last) (First) (Middle) 27 FLYNT ROAD		3. Date of Earliest Transaction (Month/Day/Year) 06/30/2017					Director 10% Owner Officer (give title Other (specify below) Controller/Secretary				
(Street)  LAUREL, MS 39443				4. If Amendment, Date Original Filed(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 Person				
	(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acqu	iired, Disposed of	f, or Beneficia	lly Owned		
	1.Title of Security (Instr. 3)  Common Stock Common Stock Common	2. Transaction Date (Month/Day/Year)  06/30/2017  06/30/2017		ned n Date, if	3. Transactic Code (Instr. 8)  Code V  A  F	4. Securi on(A) or Di (Instr. 3,	ties A	cquired d of (D) 5)  Price \$ 115.65	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)  7,429  7,431 (1)  7,426	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)  D	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Stock	00/30/2017			Г	3	ט	115.65	7,420	D			
	Common Stock								2,936.777 (2)	I	Allocated to Reporting Person's		

Account in

Issuer **ESOP** 

Common By 401(k) 33.0805 I Stock Plan

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	er Expiration Date		Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	. 3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	Title	or Number		
						Exercisable	Date	Title	of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

**RIGNEY TIM** 

127 FLYNT ROAD Controller/Secretary

LAUREL, MS 39443

### **Signatures**

/a/ D. Michael Cockrell, 07/03/2017 Attorney-in-Fact

> \*\*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).
- (1) Shares granted by the Issuer pursuant to the matching contribution provisions of the Issuer's Management Share Purchase Plan.
- Reflects allocations not reported on the Reporting Person's previous ownership report.

Reporting Owners 2

#### Edgar Filing: SANDERSON FARMS INC - Form 4

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.