#### Edgar Filing: HNI CORP - Form 4

HNI CORP Form 4 July 30, 201 <b>FORN</b> Check th if no lor subject to Section Form 4 Form 5 obligation may corn <i>See</i> Insta 1(b).	<b>A 4 UNITED</b> his box to 16. or Filed pu Section 17	MENT OF Insuant to S	Wa F CHA Section Public U	ashingto NGES II SECU 16(a) of <sup>-</sup> Utility Ho	n, D.C. N BENE VRITIES the Secu olding C	2054 ZFIC S rities ompa	9 IAL OWI Exchang	COMMISSION NERSHIP OF e Act of 1934, 1935 or Section 0	OMB Number: Expires: Estimate burden h response	•	
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Tjaden Kurt A				er Name <b>a</b> CORP [H]		or Tra	uding	<ol> <li>Relationship of Reporting Person(s) to Issuer</li> <li>(Check all applicable)</li> </ol>			
(Last)	(First)	(Middle)	3. Date	of Earliest	Transactio	on		(Cnec	ck all applica	ble)	
			(Month/Day/Year) 07/26/2013					Director 10% Owner X Officer (give title Other (specify below) below) VP and Chief Financial Officer			
F			4. If Amendment, Date Original Filed(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
MUSCATINE, IA 52761						Reporting					
(City)	(State)	(Zip)	Ta	ble I - Non	-Derivati	ve Sec	urities Acq	uired, Disposed o	f, or Benefic	ially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemee Execution I any (Month/Day	Date, if	tate, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)			(D) 5)	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	07/26/2013			М	5,000	А	\$ 10.36	35,883.867	D		
Common Stock	07/26/2013			S	5,000	D	\$ 39.1076 (1)	30,883.867	D		
Common Stock								383.302	Ι	Profit-Sharing Retirement	

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

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# 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)

Γ	. 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)	4. Transactic Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
					Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nur of S
e c	Non-qualifying mployee stock options (right to buy)	\$ 10.36	07/26/2013		М	5,000	02/23/2013	02/23/2019	Common Stock	22,

### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Tjaden Kurt A 408 EAST SECOND STREET MUSCATINE, IA 52761			VP and Chief Financial Officer			
Signatures						

Tamara S. Feldman, By Power of	07/30/2013		
Attorney	0775072015		
**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).

The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$39.08 to \$39.15, inclusive. The reporting person undertakes to provide HNI Corporation, any security holder of HNI Corporation, or the staff of

(1) the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this 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.