Edgar Filing: HNI CORP - Form 4

HNI CORP										
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May 08, 20	14									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AP	PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-0287	
Check t			0	·				Expires:	January 31,	
if no lo		MENT OF CH	IANGES IN	BENEFICI	AL C)WNI	ERSHIP OF	20		
subject Section			SECU	RITIES				Estimated average burden hours per		
Form 4								response	0.5	
Form 5	Filed put	rsuant to Section	on 16(a) of t	he Securities	Exch	ange	Act of 1934,			
obligati		(a) of the Publi	ic Utility Ho	lding Compar	ny Ao	ct of 1	935 or Section			
may con See Inst		30(h) of th	e Investmen	nt Company A	ct of	1940				
1(b).										
(Print or Type	Responses)									
1 Name and	Address of Deporting	Damon *				5	Palationship of I	Donorting Doro	an(a) to	
BELL MA	Address of Reporting RY H						5. Relationship of Reporting Person(s) to Issuer			
Symbol										
			HNI CORP [HNI]				(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction							
400 E A ST	SECOND STDE		(Month/Day/Year)				X_ Director 10% Owner Officer (give title Other (specify			
408 EAST SECOND STREET			05/06/2014				below) below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
MUSCAT	INE, IA 52761					P	Form filed by Mo erson	ore than One Rep	orting	
(City)	(State)	(Zip)	Table I - Non-	-Derivative Secu	rities	Асані	red, Disposed of,	or Beneficiall	v Owned	
1.Title of	2. Transaction Date		3.	4. Securities A		-	. – .	6.	7. Nature of	
Security	(Month/Day/Year)	Execution Date,	Acquired (A) 5. Amount of f (D) Securities			0. Ownership	Indirect			
(Instr. 3)	(1.1011111204), 1041)	any	Code	(Instr. 3, 4 and			Beneficially	Form:	Beneficial	
		(Month/Day/Ye					Owned	Direct (D)	Ownership	
							Following Reported	or Indirect	(Instr. 4)	
					(A)		Transaction(s)	(I) (Instr. 4)		
			Cala V	A	or	Duine	(Instr. 3 and 4)	()		
Common			Code V		(D)	Price \$ 0				
Stock	05/06/2014		А	2,654.8672	А	(1)	31,842.0889	D		
						_				
Common Stock	05/06/2014		А	542.3922	А	\$ 0 (2)	32,384.4811	D		
STOCK						(_)				

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)

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1. 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	;	ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BELL MARY H 408 EAST SECOND STREET MUSCATINE, IA 52761	Х						
Signatures							
Tamara S. Feldman, By Power of Attorney	of	05/08/2014					
**Signature of Reporting Person		D	ate				

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 were granted to the reporting person under the Corporation's 2007 Equity Plan for Non-Employee Directors.
- (2) These shares were acquired 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.