#### Edgar Filing: RILEY KEVIN L - Form 4

| RILEY KEVIN                                                                                                                                          |                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                     |                                    |                                                  |                                        |                                                                                                                                                                                    |                     |                                                                                                                                          |                                                                      |                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|--------------------------------------------------|----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| November 29, 20                                                                                                                                      |                                                                                              | <ul> <li>17</li> <li>UNITED STATES SECURITIES AND EXCHANGE COMMISSION<br/>Washington, D.C. 20549</li> <li>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br/>SECURITIES</li> <li>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br/>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br/>30(h) of the Investment Company Act of 1940</li> </ul> |                                    |                                                  |                                        |                                                                                                                                                                                    |                     |                                                                                                                                          |                                                                      | PROVAL<br>3235-0287                                                                           |
| Check this bo<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may continue.<br><i>See</i> Instruction<br>1(b). | <b>STATEM</b><br>Filed purs<br>Section 17(a                                                  |                                                                                                                                                                                                                                                                                                                                                                                                     |                                    |                                                  |                                        |                                                                                                                                                                                    |                     |                                                                                                                                          |                                                                      | Number: January 31,<br>Expires: 2005<br>Estimated average<br>burden hours per<br>response 0.5 |
| (Print or Type Respo<br>1. Name and Addre<br>RILEY KEVIN                                                                                             | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>HAWTHORN BANCSHARES,<br>INC. [HWBK] |                                                                                                                                                                                                                                                                                                                                                                                                     |                                    |                                                  |                                        | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                                                                                                      |                     |                                                                                                                                          |                                                                      |                                                                                               |
| (Last)<br>C/O HAWTHO<br>INC., 132 EAST<br>PO BOX 688                                                                                                 | RN BANCSH                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                     | 3. Date of<br>(Month/D<br>11/28/20 | -                                                | ansaction                              |                                                                                                                                                                                    |                     | Director<br>Officer (give below)                                                                                                         |                                                                      | Owner<br>rr (specify                                                                          |
| JEFFERSON C                                                                                                                                          |                                                                                              | ndment, Da<br>th/Day/Year                                                                                                                                                                                                                                                                                                                                                                           | -                                  | l                                                |                                        | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |                     |                                                                                                                                          |                                                                      |                                                                                               |
| (City)                                                                                                                                               |                                                                                              | Zip)                                                                                                                                                                                                                                                                                                                                                                                                | Tabl                               | I Non D                                          | anivativa                              | Soon                                                                                                                                                                               | itios A ag          | Person                                                                                                                                   | or Popoficial                                                        | w Owned                                                                                       |
| 1.Title of 2. T                                                                                                                                      | Fransaction Date<br>onth/Day/Year)                                                           | 2A. Deen                                                                                                                                                                                                                                                                                                                                                                                            | ned<br>1 Date, if                  | 3.<br>Transactic<br>Code<br>(Instr. 8)<br>Code V | 4. Securi<br>on(A) or Di<br>(Instr. 3, | ties A<br>spose                                                                                                                                                                    | cquired<br>d of (D) | uired, Disposed of<br>5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of                                                                                  |
| Common 11.<br>Stock 11.                                                                                                                              | /28/2017                                                                                     | 11/28/2                                                                                                                                                                                                                                                                                                                                                                                             | 017                                | Р                                                | 333                                    | А                                                                                                                                                                                  | \$<br>20.25         | 22,340.279                                                                                                                               | Ι                                                                    | Trust                                                                                         |

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------|----------------------------------------------|----------------------------------------|-----------------------------------------------------|----------------------------------------------------------------------------|
|                                                     |                                                                       |                                         |                                                             | Code V                                | (A) (D)                                                                                                                 | Date<br>Exercisable                                            | Expiration<br>Date | Title                                        | Amount<br>or<br>Number<br>of<br>Shares |                                                     |                                                                            |

Relationships

10% Owner Officer Other

### **Reporting Owners**

**Reporting Owner Name / Address** 

**RILEY KEVIN L** C/O HAWTHORN BANCSHARES, INC. 132 EAST HIGH STREET, PO BOX 688 JEFFERSON CITY, MO 65102

## Signatures

/s/ Kevin L. 11/29/2017 Riley

\*\*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).

Director

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.