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BRUEGENHEMKE KATHLEEN L

Form 4

Common

Stock

November 29, 2017

FORM	FORM 4 UNITED STATES SECURITIES AND EVOLANCE COMMISSION							OMB APPROVAL		
Washington, D.C. 20549						OMB Number:	3235-028			
Check the if no lon								Expires:	January 31	
subject t		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							200 verage	
Section			SECUE	KITIES				burden hours per		
Form 4 o			16(-) - f.41-		T	21	- A -4 -£ 1024	response	0.	
obligatio						_	e Act of 1934, f 1935 or Section			
may con	unue.		ie Unity Hor ie Investment	_	_	d .		1		
See Instr 1(b).	ruction	30(II) 01 III	ic mvestmem	Compai	ly Ac	. 01 17-				
1(0).										
(Print or Type	Responses)									
	Address of Reporting I		2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
BRUEGEN	HEMKE KATHL	Sym				~	Issuer			
			HAWTHORN BANCSHARES, INC. [HWBK]				(Check all applicable)			
(Last)	(First) (M	ate of Earliest T	e of Earliest Transaction				Director 10% Owner Officer (give title Other (specify			
	ELIODNI D ANGGL		nth/Day/Year)				below)	below)	r (specify	
	THORN BANCSE		28/2017				SENIOR '	VICE PRESID	ENT	
PO BOX 68	EAST HIGH STRI 88	EEI,								
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
		Filed	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
JEFFERSO	N CITY, MO 651	02					Form filed by M Person			
(City)	(State)	(Zip)	Table I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	•					6.	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution Date	e, if Transaction Code	on(A) or Di (Instr. 3,	•		Securities	Ownership Form: Direct	Indirect Repeticial	
		any (Month/Day/Yo		(IIIsu. 3,	+ and	3)	Beneficially Owned	(D) or	Ownership	
		· ·	, , ,				Following	Indirect (I)	(Instr. 4)	
					(A)		Reported Transaction(s)	(Instr. 4)		
			C-1- V	A	or	Duiter	(Instr. 3 and 4)			
Common				Amount	(D)	Price \$				
Stock	11/28/2017	11/28/2017	P	333	A	20.25	15,006.097 <u>(1)</u>	D		
Common Stock							3,399.76	I	IRA	
Stock									D C	
							11 564 5511		Profit	

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

Sharing

Trust

41,564.5511

(2)

OMB APPROVAL

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SEC 1474 (9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Titl	e and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Da	ate	Amou	nt of	Derivative]
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	5
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired	Acquired]
	·				(A) or						J
					Disposed						7
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	-	o o	Number		
						Lacreisable			of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

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

SENIOR VICE PRESIDENT

Signatures

/s/ Kathleen L. Bruegenhemke 11/29/2017

**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) Includes shares acquired since last report pursuant to Company DRIP program.
- (2) Includes shares acquired since last report pursuant to Company profit sharing trust.

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.

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