Edgar Filing: SCALF THOMAS R - Form 4

| SCALF THO | OMAS R | | | | | | | | | | | |
|--|-----------------------------------|----------------------|---------------------------------|-----------------------------|---|------------|---|--|---|---|--|--|
| Form 4 | | | | | | | | | | | | |
| February 08, | _ | | | | | | | | | | | |
| FORN | 14 _{UNITE} | ED STATES | | | | | IGE C | OMMISSION | OMB | PROVAL 3235-0287 | | |
| Check the | Was | shington, | D.C. 2054 | 49 | | | Number: | January 31, | | | | |
| if no long subject to Section 1 Form 4 o | F CHAN | GES IN SECUR | | CIAL | L OWN | NERSHIP OF | Expires: Estimated a burden hour response | 2005 verage | | | | |
| Form 5 obligation may cont <i>See</i> Instru 1(b). | inue. Section | 17(a) of the | Public U | tility Hold | | any . | Act of | e Act of 1934, 1935 or Sectior 0 | 1 | | | |
| (Print or Type F | Responses) | | | | | | | | | | | |
| | | | Symbol | | I Ticker or T | c | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| (Last) | (First) | (Middle) | 3. Date of | f Earliest Tr | ansaction | | | (Check an applicable) | | | | |
| (M | | | (Month/E 02/07/2 | - | | | | Director 10% Owner X Officer (give title Other (specify below) below) Senior Vice President | | | | |
| | (Street) | | | endment, Da nth/Day/Year | - | | | 6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M | one Reporting Per | rson | | |
| BLOOMIN | GTON, MN 5 | 5431-2303 | | | | | | Person | | porting | | |
| (City) | (State) | (Zip) | Tabl | le I - Non-D | Derivative Se | ecuriti | ies Acqu | uired, Disposed of | , or Beneficial | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction I (Month/Day/Ye | ear) Executio any | med on Date, if Day/Year) | Code | 4. Securitie on(A) or Disp (Instr. 3, 4 a Amount | osed o | of (D) | 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 | 02/07/2018 | | | A | | A | \$ 47.5 | 1,908 | Ι | By Benefit Plan Trust | | |
| Common Stock | | | | | | | | 6,311 | I | By Benefit Plan Trust | | |
| Common Stock | | | | | | | | 7,230 | D | | | |

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)

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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 Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, | 3 | ate | 7. Title Amour Underl Securit (Instr. 3 | nt of ying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna 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 | | | | |
| SCALF THOMAS R 1400 WEST 94TH STREET BLOOMINGTON, MN 55431-2303 | | | Senior Vice President | | | | | |
| Signatures | | | | | | | | |
| Amy C. Becker, Attorney-in-fact for Thomas R. | | | | | | | | |
| Scalf | | | 02/08/2018 | | | | | |
| **Signature of Reporting Person | | | Date | | | | | |
| Evaluation of Responses: | | | | | | | | |

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).

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.