Edgar Filing: Hein LeLand J - Form 4

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | STATEMENT O Filed pursuant to ction 17(a) of the | S SECURITIES A Washington, F CHANGES IN SECUR Section 16(a) of th Public Utility Holo) of the Investment | , D.C. 20 BENEFI RITIES e Securit ding Com | 549 CCIA ies E ipany | L OWN xchange Act of | NERSHIP OF e Act of 1934, 1935 or Sectior | OMB Number: Expires: Estimated a burden hour response | | |
|--|---|---|---|-------------------------------|--|--|---|---|--|
| (Print or Type Responses) |) | | | | | | | | |
| 1. Name and Address of Hein LeLand J | Symbol | uer Name and Ticker or Trading l 'ENAL CO [FAST] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First | t) (Middle) | 3. Date of Earliest Transaction (Check | | | | k all applicable) | | | |
| 2001 THEURER BI | (Month/Day/Year) 10/18/2017 | - | | | | Director 10% Owner X Officer (give title Other (specify below) Senior Executive VP | | | |
| (Stree | 4. If Amendment, Da Filed(Month/Day/Year | - | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| WINONA, MN 559 | 87 | | | | | Person | lore than One Re | porting | |
| (City) (State | e) (Zip) | Table I - Non-I | Derivative | Securi | ities Acqu | uired, Disposed of | , or Beneficial | y Owned | |
| | action Date 2A. Dee Day/Year) Executio any (Month/ | | 4. Securit on(A) or Dis (Instr. 3, 4) Amount | sposed | l 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 10/18/2 | 2017 | M | 10,000 | (D) A | \$ 27 | 20,258 | D | | |
| Stock | | | ,, | | b | | | | |
| Common 10/18/2 Stock | 2017 | S | 10,000 | D | \$ 48.74 | 10,258 | D | | |

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

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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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|---------------------------------------|--|--------|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option (Right to Buy) | \$ 27 | 10/18/2017 | | М | | 10,000 | <u>(1)</u> | 05/31/2017 | Common Stock | 10,000 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------------------|-------|--|--|--|
| reporting o wher runte, runtess | Director | 10% Owner | Officer | Other | | | |
| Hein LeLand J 2001 THEURER BLVD. WINONA, MN 55987 | | | Senior Executive VP | | | | |
| Signatures | | | | | | | |
| John Milek, | 10/20 | /2017 | | | | | |

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) The options will fully vest and become exercisable over a period of eight years, with 50% of the option vesting and becoming exercisable half way through the vesting period, and remainder vesting and becoming exercisable proportionately each year thereafter.

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.

Attorney-in-Fact

**Signature of Reporting Person