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HNI CORF Form 4 March 01,	2005) STATES	5 SECU	IRITIES	AND E	ХСН	IANGE	COMMISSIC)N _{OI}	OMB /	APPROVA	
Check this box				Washington, D.C. 20549						umber:	3235- Januar	
if no longer subject to Section 16. Form 4 or Form 5 obligations Section 17(a) of the section of		irsuant to	DF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section								nated average en hours per	
<i>See</i> Instruction 30(h) of the Investment Company Act of 1940 1(b).												
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> FIELDS MALCOLM C				uer Name a I CORP [H	ading	5. Relationship of Reporting Person(s) to Issuer						
				of Earliest	-	on		(Check all applicable)				
414 EAST THIRD STREET			(Month/Day/Year) 02/25/2005					Director 10% Owner X Officer (give title Other (specify below) below) VP, Chief Information Officer				
				nendment, Ionth/Day/Y	-	nal		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
(City)	(State)	(Zip)	-		~ • •	G		Person				
1.Title of				ble I - Non 3.	-Derivativ 4. Securi			cquired, Disposed 5. Amount of	l of, or 1 6.		ally Owned Nature of	d
Security (Instr. 3)	(Month/Day/Year)	ransaction Date 2A. Deemed nth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securi on(A) or D (Instr. 3,	ispose	ed of (D)	Securities Beneficially Owned Following Reported Transaction(s)	Owners Form: Direct (or India (I)	OwnershipIndirectForm:BeneficialDirect (D)Ownershipor Indirect(Instr. 4)		
G				Code V	Amount		Price	(Instr. 3 and 4)				
Common Stock	02/25/2005			А	386 <u>(1)</u>	А	\$ 43.76	4,940.4119	D			
Common Stock	02/25/2005			F	137	D	\$ 43.76	4,803.4119	D			
Common Stock	02/25/2005			А	497 <u>(2)</u>	А	\$ 43.76	5,300.4119	D			
Common Stock	02/25/2005			F	182	D	\$ 43.76	5,118.4119	D			
Common Stock								2,887.9486	Ι		rofit-Shai etirement	-

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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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration Da	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
							Date	Title			
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
FIELDS MALCOLM C 414 EAST THIRD STREET MUSCATINE, IA 52761			VP, Chief Information Officer						
Signatures									
/s/ Tamara S. Feldman, By Pow Attorney	ver of	(02/28/2005						
**Signature of Reporting Person	L		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) These shares of stock were granted under the HNI Corporation ERISA Supplemental Retirement Plan for the fiscal year ending 2004 and issued pursuant to the HNI Corporation amended and restated Stock-Based Compensation Plan.
- (2) These shares of stock were granted under the HNI Corporation Long-Term Performance Plan for the three-year period 2002-2004.

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.