Edgar Filing: KHAYAT ROBERT C - Form 4

| KHAYAT R Form 4 | OBERT C | | | | | | | | | | |
|--|--|---|---|--|---------------|----------|----------------------------|---|------------------|-----------|--|
| October 02, 2 | | | | | | | | | | | |
| | FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | OMB Number: | 3235-0287 | |
| Check thi if no long subject to Section 14 Form 4 of | 6. | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | | | | | |
| Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| KHAYAT ROBERT C S | | | Symbol | Name and | | | ng | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | SANDERSON FARMS INC [SAFM] | | | | | (Check all applicable) | | | |
| (N | | | 3. Date of (Month/D 09/28/20 | - | ansaction | | | X_ Director10% Owner Officer (give titleOther (specify below)Other (specify | | | |
| | | | | ndment, Date Original hth/Day/Year) | | | | 6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person | | | |
| LAUREL, N | IS 39443 | | | | | | | Form filed by M Person | Iore than One Re | porting | |
| (City) | (State) | (Zip) | Tabl | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | curity (Month/Day/Year) Execution Date, if | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Stock | 09/28/2007 | | | Code V A | Amount 234 | (D) A | Price \$ 41.67 | (Instr. 5 and 4) 3,546 | D | | |
| Common Stock | 09/28/2007 | | | А | 58 | А | \$ 0 <u>(1)</u> | 3,604 | D | | |

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.

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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) | 4. Transact Code (Instr. 8) | 5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and unt of rlying rities : 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--------------------------------------|--|---------------------|--------------------|-----------------------|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| KHAYAT ROBERT C 127 FLYNT ROAD LAUREL, MS 39443 | Х | | | | | | | |
| Signatures | | | | | | | | |
| /s/ D. Michael Cockrell, Attorn | ley | | | | | | | |
| In Fact 10/02/2007 | | | | | | | | |
| **Signature of Reporting Person | | Da | te | | | | | |
| Explanation of Responses: | | | | | | | | |

TICOP

* 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) Shares granted by the Issuer pursuant to the matching contribution provisions of the Issuer's Management Share Purchase Plan.

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.