SANDERSON FARMS INC

Form 4 January 03, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2. Issuer Name and Ticker or Trading

OMB APPROVAL

Number: 3235-0287

Synings: January 31,

Estimated average burden hours per

Expires:

5. Relationship of Reporting Person(s) to

burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

Section 16.

Form 4 or

Form 5

Obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Section 17(a) of the Public Utility Holding Company Act of 1035 or Section 17(b) of the Public Utility Holding Company Act of 1035 or Section 17(c) of the Public Utility Holding Company Act of 1035 or Section 17(c) of the Public Utility Holding Company Act of 1035 or Section 17(c) of the Public Utility Holding Company Act of 1035 or Section 17(c) of the Public Utility Holding Company Act of 1035 or Section 16(c) of the Public Utility Holding Company Act of 1035 or Section 16(c) of the Public Utility Holding Company Act of 1035 or Section 16(c) of the Public Utility Holding Company Act of 1035 or Section 16(c) of the Securities Exchange Act of 1035 or Section 16(c) of the Securities Excha

obligations may continue. See Instruction

See Instruction

1(b).

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 Responses)

1. Name and Address of Reporting Person *

LIVINGSTON PHIL K		Symbol SANDERSON FARMS INC [SAFM]				0	Issuer (Check all applicable)				
(Last)	(First)	(Middle)	(Month/D	- -				_X_ Director 10% Owner Officer (give title Other (specify below) below)			
127 FLYNT ROAD 12/3			12/31/20	12/31/2012					,		
(Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Fi LAUREL, MS 39443				Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(Stata)	(7in)									
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative :	Secur	ities Acqu	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		n Date, if	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	12/31/2012			A	75	A	\$ 47.55	18,337	D		
Common Stock	12/31/2012			A	18	A	\$ 0 (1)	18,355	D		
Common Stock	12/31/2012			F	24	D	\$ 47.55	18,331	D		
Common Stock								1,867	I	By Spouse	

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

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SEC 1474 (9-02)

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amoun Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno 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						
.r. g	Director	10% Owner	Officer	Other			
LIVINGSTON PHIL K							
127 FLYNT ROAD	X						
LAUREL, MS 39443							

Signatures

/s/ D. Michael Cockrell, Attorney-in-Fact 01/03/2013

**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) 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.

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