KELLY GREEN EDITH Form 3 September 25, 2018 **FORM 3** UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 Responses)

1. Name and A Person <u>*</u> KELLY		-	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SANDERSON FARMS INC [SAFM]						
(Last)	(First)	(Middle)	09/20/2018		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
127 FLYNT LAUREL,Â	(Street)	43		(Check X_ Director Officer (give title below	Other	Owner Filing(_X_Fo w) Person For	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I -	Non-Derivat	ive Securitie	es Beneficia	eneficially Owned			
1.Title of Secu (Instr. 4)	rity		2. Amount Beneficially (Instr. 4)	of Securities y Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of I Ownership (Instr. 5)	ndirect Beneficial			
Reminder: Rep owned directly			ch class of securities benefi	cially SI	EC 1473 (7-02)					
	inforn requi curre	nation conta red to respo ntly valid OI	pond to the collection o ained in this form are no nd unless the form disp MB control number.	ot blays a						
ſ	Table II - Der	rivative Secu	rities Beneficially Owned (e.g., puts, calls,	warrants, opti	ions, converti	ble securities)			
1. Title of Deri (Instr. 4)	ivative Securi	Expir	ration Date Securi	e and Amount of ties Underlying ative Security 4)	4. Conversio or Exercis Price of		(Instr. 5)			

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships				
1	Director	10% Owner	Officer	Other	
KELLY GREEN EDITH 127 FLYNT ROAD LAUREL, MS 39443	ÂX	Â	Â	Â	
Signatures					
/s/ D. Michael Cockrell, Attorney-in-Fact	09/24/2018				
**Signature of Reporting Person		Da	ite		

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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).

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Remarks:

Exhibit 24 - Confirming Statement (CE)

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.