Edgar Filing: GENERAL MILLS INC - Form 4

GENERAL I	MILLS INC												
Form 4													
November 0.	3, 2014												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB AF	OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287			
Check the				-						Expires:	January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP								NERSHIP OF	Estimated average				
Section 1				SECURITIES						burden hours per			
Form 4 o	r									response	0.5		
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,													
obligation may cont				•		•	· ·		of 1935 or Section	n			
See Instru		30(h)	of the In	vestm	ent	Compan	y Ac	t of 19	040				
1(b).													
(Print or Type I	Desponses)												
(Thit of Type I	(xesponses)												
1. Name and A	ddress of Reporting	g Person *	2 Issue	r Name	and	Ticker or	Tradii	۱a	5. Relationship of	Reporting Pers	son(s) to		
1. Name and Address of Reporting Person 2. IssueErickson Peter CSymbol				Ivanic	anu	TICKET OF	Traun	ig	Issuer				
			-	AL N	ШJ	S INC I	GIST						
(I+)	GENERAL MILLS INC [GIS]					(Chec	k all applicable	2)					
(Last)					f Earliest Transaction				Director 10% Owner				
NUMBER (ONE GENERAI	MILLS	(Month/E 10/29/2	-	1)				Director X Officer (give		er (specify		
BOULEVA			10/2/12	014					below)	below)			
										ve Vice Preside			
				mendment, Date Original					6. Individual or Joint/Group Filing(Check				
			Filed(Mor	nth/Day/	Year))			Applicable Line) _X_ Form filed by 0)ne Reporting Pe	rson		
MINNEAPO	OLIS, MN 5542	6								fore than One Re			
	5215, 1010, 5542	0							Person				
(City)	(State)	(Zip)	Tabl	e I - No	on-D	erivative	Secur	ities Ac	equired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Da								5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year		Execution Date, if			nAcquirec			Securities	Ownership	Indirect		
(Instr. 3)		any (Month/	Month/Day/Year)		8)	Disposed (Instr. 3,			Beneficially Owned Following	Form: Direct (D) or	Ownership		
		(1.101111)	<i>suj, 1011)</i>	(111511)	0)	(1115117-0)		2)	Reported	Indirect (I)	(Instr. 4)		
							(A) or		Transaction(s)	(Instr. 4)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common													
Stock	10/29/2014			G	V	1,174	D	\$0	135,094.6968	D			
											1 5		
Common Stock									8,606	Ι	by Trust (1)		

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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	6. Date Exercisable and Expiration Date (Month/Day/Year)		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				
Erickson Peter C NUMBER ONE GENERAL MILLS BOULEVARD MINNEAPOLIS, MN 55426			Executive Vice President					
Signatures								
By: Christopher A. Rauschl For: Peter C. Erickson	11/03/2	2014						
**Signature of Reporting Person	Date	;						
Explanation of Responses:								
* If the form is filed by more than one reporting person, <i>see</i> 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) Held in Trust by the Trustee of the General Mills Savings 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.