

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

OMB APPROVAL					
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nours per response 0.5					

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)										
1. Name and Address of Reporting Person*  DYKSTRA DAVID E	2. Date of Event I Statement (Month				3. Issuer Name and Ticker or Trading Symbol MGP INGREDIENTS INC [MGPI]					
(Last) (First) (Middle) 1700 ARBOR LANE	— 08/25/2011 —			4. Relationship of Issuer					5. If Amendment, Date Original Filed(Month/Day/Year)	
ATCHISON, KS 66002					(Check all applicable)  Director   10% Owner   X Officer (give title   below)   Vice President				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)	(State) (Zip) Table I - Non-Derivative Securities Beneficially Owned									
1.Title of Security (Instr. 4)	2. Amount of Se Beneficially Ow (Instr. 4)			ally Owr		Form (D) (I)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock			45,312				D			
Common Stock 2,52			2,520				I	By ESOP		
Reminder: Report on a separate line for each class of Persons who respon unless the form disp  Table II - Derivative	d to the col lays a curre	llection o	of info	ormatio IB cont	n contained in rol number.			·		
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)		n Date	3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)			ve o	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	e	6. Nature of Indirect Beneficial Ownership (Instr. 5)
_	Date Exercisable Date Expiration Date Title Amount or Number of Shares		t or Number of	Security		(D) or Indirect (I) (Instr. 5)				
Reporting Owners										

Donouting Owney Name /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
DYKSTRA DAVID E 1700 ARBOR LANE ATCHISON, KS 66002			Vice President				

## **Signatures**

David E. Dykstra	08/30/2011
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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).

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.