FORM 4	4
--------	---

	1
Check this box if no	Ī
longer subject to	
Section 16. Form 4 or	•
Form 5 obligations	
may continue. See	
Instruction 1(b).	

(Print or Type Perponses)

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

### STATEMENT OF CHANGES IN 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 SCHALLER DARYL	2. Issuer Name and MGP INGRED			0.		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last) (First) C/O MGP INGREDIENTS, COMMERCIAL STREET	(Middle) INC., 100	3. Date of Earliest 03/09/2018	Transactio	n (M	onth/Day/	Year)		Officer (give title below)Other (specify below)				
(Street) ATCHISON, KS 66002	4. If Amendment, Date Original Filed(Month/Day/Year)						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)	Та	ble I - Nor	n-Der	ivative S	ecuritie	es Acqui	ired, Disposed of, or Beneficially	Owned			
(Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	Beneficial		
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownershij (Instr. 4)		
Common Stock	03/09/2018		S		388	D	\$ 79	43,449	Ι	By Trus		
Common Stock	03/13/2018		S		19,612	D	\$ 80.08	23,837	I	By Trus		
Common Stock								5,000	Ι	By IRA		
Common Stock								2,851.196	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 SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, caus, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	Nu	nber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Der	ivative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Sec	urities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Aco	quired			4)			Following	Direct (D)	
					(A)	or						Reported	or Indirect	
					Dis	posed						Transaction(s)	(I)	
					of (	D)						(Instr. 4)	(Instr. 4)	
					(Ins	str. 3,								
					4, a	nd 5)								
										Amount				
							D /	<b>.</b>		or				
								Expiration	Title	Number				
							Exercisable	Date		of				
				Code V	(A	(D)				Shares				

## **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SCHALLER DARYL C/O MGP INGREDIENTS, INC. 100 COMMERCIAL STREET ATCHISON, KS 66002	Х						

### **Signatures**

/s/ Lori Norlen, Attorney in Fact for Daryl R. Schaller

# **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).

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.