FORM	4
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Check this box if no
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

1. Name and Addres Seaberg Karen	ss of Reporting I	Person <sup>*</sup>	2. Issuer Name a MGP INGRED			0.			5. Relationship of Reporting Pers (Check all appli X Director		er
(Last) 20076 266TH R	(First) OAD	(Middle)	3. Date of Earliest 03/05/2020	Transactio	n (M	onth/Day	Year)		Officer (give title below)	Other (specify	below)
ATCHISON, KS	(Street)		4. If Amendment,	Date Origi	nal F	iled(Month/	Day/Yea	r)	6. Individual or Joint/Group Filin _X_Form filed by One Reporting Person Form filed by More than One Reporting		able Line)
(City)	(State)	(Zip)	Ta	ble I - Nor	1-Dei	ivative S	ecuriti	es Acqu	ired, Disposed of, or Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		(Instr. 8)	ction	4. Securi (A) or D (Instr. 3,	isposed	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial
			(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 5 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock		03/05/2020(1)		А		1,121	А	\$ 29.65	17,003	D	
Common Stock									99,066	Ι	by IRA
Common Stock									519,095	Ι	by spouse's trust
Common Stock									193,154	Ι	by trust
Common Stock									2,428,096	I	by Cray MGP Holdings LP

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

			( <i>e.g.</i> ,	outs, cans,	wa	irran	ts, op	tions, conver	tible securi	ties)					
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	Transactio	on	Numl	ber	and Expirati	on Date	Amou	int of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Under	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	ities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	r						Reported	or Indirect	
						Dispo	osed						Transaction(s)	(I)	
						of (D	)						(Instr. 4)	(Instr. 4)	
						(Instr	· · · ·								
						4, and	15)								
											Amount				
								<b>D</b> .	<b>.</b>		or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

## **Reporting Owners**

		Relationsl	nips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Seaberg Karen 20076 266TH ROAD ATCHISON, KS 66002	Х			

### Signatures

s Lynn, Attorney in Fact for Karen Seaberg
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\*Signature of Reporting Person

03/10/2020 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) The transaction reported on this form reflects the award of shares in lieu of cash retainer and meeting fees.

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.