FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

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 Ty | pe Response | s) | | | | | | | | | | | | | | | |
|---|---|----------------------------------|--|--|--|---|---|--|-----------------------------|----------------------------------|--|---|---|--|---|--|--|
| 1. Name and Address of Reporting Person* STRANDJORD M JEANNINE | | | | | 2. Issuer Name and Ticker or Trading Symbol MGP INGREDIENTS INC [MGPI] | | | | | | 5 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner | | | | | |
| (Last) (First) (Middle) C/O MGP INGREDIENTS, INC., 100 COMMERCIAL | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/23/2021 | | | | | | | Office | r (give title belo | ow) | Other (spe | cify belov | w) |
| (Street) ATCHISON, KS 66002 | | | | 4. If | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person | | | | | |
| (City) (State) (Zip) | | | | | Table I - Non-Derivative Securities Acqui | | | | | | Cquir | ired, Disposed of, or Beneficially Owned | | | | | |
| (Instr. 3) Date (Month/Day/Year) ar | | | Execution any | A. Deemed execution Date, if my Month/Day/Year) | | etion | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | | Ownership In Form: E Direct (D) | India Bend Owr | Beneficial Ownership | |
| | | | | | | Code | V | Amount | (A) or (D) | Pric | ce | | | | or Indirec (I) (Instr. 4) | et (Inst | tr. 4) |
| Common | Stock | | 11/23/2021 | | | P | | 1,000 | A | \$ 75.02 | 236 | 1,000 | | | I | Ву | trust |
| Common Stock | | | | | | | | | | | 46,172 | I | | Rev Tru | ocable st | | |
| Common | Stock | | | | | | | | | | | 1,130 | | | D | | |
| Reminder: | Report on a s | separate line | for each class of se | I - Deriv | eative Secu | rities Ac | P c ti | ersons vontained ne form o | vho re in thi lisplay | s form ys a cu r Benef | n are urren ficiall | not requ itly valid | ction of inf uired to res OMB conf | spond ur | less | SEC 147 | 74 (9-02) |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transact Date (Month/Da | tion 3A. Deem Execution any (Month/Da | Date, if | Code | 5. Numb of Deriv. Secur Acqui (A) or Dispo of (D) (Instr. 4, and | er ative ties red sed 3, 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | tet Amou Under Securi (Instr. 4) | | erlying | 8. Price of Derivative Security (Instr. 5) | 9. Numbo Derivativ Securities Beneficia Owned Followin Reported Transacti (Instr. 4) | e Own Formally Der Sec g Dire on(s) (I) | nership n of ivative urity: ect (D) ndirect tr. 4) | 11. Natur of Indirec Beneficia Ownershi (Instr. 4) |

Reporting Owners

| | Relationships | | | | | |
|--|---------------|--------------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| STRANDJORD M JEANNINE C/O MGP INGREDIENTS, INC. 100 COMMERCIAL ATCHISON, KS 66002 | X | | | | | |

Signatures

| **Signature of Reporting Person | 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).

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.