## Edgar Filing: SCALZO JOSEPH - Form 4

| SCALZO JO                           | SEPH                   |   |                                 |   |                       |                        |   |   |                                       |                                     |  |
|-------------------------------------|------------------------|---|---------------------------------|---|-----------------------|------------------------|---|---|---------------------------------------|-------------------------------------|--|
| Form 4                              |                        |   |                                 |   |                       |                        |   |   |                                       |                                     |  |
| January 06, 2                       | 2005                   |   |                                 |   |                       |                        |   |   |                                       |                                     |  |
| FORM                                | 14                     |   |                                 |   |                       | ~~~                    |   | 01 <b>11 11 11 11</b>   | OMB APPROVAL                          |                                     |  |
|                                     | • • UNITEL             | ) STATES  |                                 |   | AND EX(<br>, D.C. 20: |                        | NGE C   | OMMISSION   | OMB<br>Number:                        | 3235-0287                           |  |
| Check thi                           |                        |   |                                 |   | , 2101 20             |                        |   |   | Expires:                              | January 31,                         |  |
| if no long<br>subject to            |                        | MENT O  | F CHAN                          | GES IN  | BENEFI                | CIA                    | LOWN  | NERSHIP OF  | . 2005                                |                                     |  |
|                                     | Section 16. SECURITIES |   |                                 |   |                       |                        |   |   | Estimated average<br>burden hours per |                                     |  |
| Form 4 or                           | orm 4 or               |   |                                 |   |                       |                        |   | response 0.5  |                                       |                                     |  |
| Form 5<br>obligation                | n a                    | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, |                                 |   |                       |                        |   |   |                                       |                                     |  |
| may cont                            |                        |   |                                 | •   | •                     | · ·                    |   | 1935 or Section   | 1                                     |                                     |  |
| <i>See</i> Instru<br>1(b).          | action                 | 30(h)   | of the In                       | vestment  | Compan                | y Aci                  | t of 194  | 0   |                                       |                                     |  |
| (Print or Type F                    | Responses)             |   |                                 |   |                       |                        |   |   |                                       |                                     |  |
| 1. Name and A                       | g Person <u>*</u>      | 2. Issuer Name and Ticker or Trading                                    |                                 |   |                       | ıg                     | 5. Relationship of Reporting Person(s) to                   |   |                                       |                                     |  |
| SCALZO JO                           |                        | Symbol  |                                 |   |                       |                        | Issuer  |   |                                       |                                     |  |
|                                     | HNI CORP [HNI]         |   |                                 |   |                       | (Check all applicable) |   |   |                                       |                                     |  |
| (Last)                              | (First)                | (Middle)  | 3. Date of Earliest Transaction |   |                       |                        |   | × ×   |                                       | <b>,</b>                            |  |
|                                     |                        | (Month/Day/Year)  |                                 |   |                       |                        | X_ Director 10% Owner<br>Officer (give title Other (specify |   |                                       |                                     |  |
| C/O GILLETTE<br>COMPANY, PRUDENTIAL |                        |   | 12/31/2004                      |   |                       |                        |   | below) below)   |                                       |                                     |  |
| TOWER BU                            |                        | L   |                                 |   |                       |                        |   |   |                                       |                                     |  |
|                                     | (Street)               |   | 4 If Ame                        | ndment D  | ate Original          |                        |   | 6 Individual or Io  | int/Group Filin                       | o(Check                             |  |
| · · ·                               |                        |   |                                 | 4. If Amendment, Date Original<br>Filed(Month/Day/Year) |                       |                        |   | 6. Individual or Joint/Group Filing(Check<br>Applicable Line) |                                       |                                     |  |
| _X_ Form filed by C                 |                        |   |                                 |   |                       | One Reporting Person   |   |   |                                       |                                     |  |
| BOSTON, N                           | MA 02199               |   |                                 |   |                       |                        |   | Form filed by M<br>Person                                     | ore than One Re                       | porting                             |  |
| (City)                              | (State)                | (Zip)   | Tab                             | e I - Non-I   | Derivative            | Securi                 | ities Acq   | uired, Disposed of  | , or Beneficial                       | ly Owned                            |  |
| 1.Title of                          | 2. Transaction Da      |   |                                 | 3.  | 4. Securit            |                        |   | 5. Amount of  | 6.                                    | 7. Nature of                        |  |
| Security<br>(Instr. 3)              | (Month/Day/Year        | <ul> <li>Execution<br/>any</li> </ul>                                   | n Date, if                      | Code (Instr. 3, 4 and 5)                                |                       |                        |   | Securities<br>Beneficially<br>Owned                           | Ownership<br>Form: Direct<br>(D) or   | Indirect<br>Beneficial<br>Ownership |  |
| (1130.3)                            |                        |   | Day/Year)                       |   |                       |                        |   |   |                                       |                                     |  |
|                                     |                        |   |                                 |   |                       |                        |   | Following   | Indirect (I)                          | (Instr. 4)                          |  |
|                                     |                        |   |                                 |   |                       | (A)                    |   | Reported<br>Transaction(s)                                    | (Instr. 4)                            |                                     |  |
|                                     |                        |   |                                 | Code V  | Amount                | or<br>(D)              | Price   | (Instr. 3 and 4)  |                                       |                                     |  |
|                                     |                        |   |                                 | Couc v  | Amount                | (D)                    | \$  |   |                                       |                                     |  |
| Common                              | 12/31/2004             | 01/04/2   | .005                            | А   | 6.2304                | А                      | 43.05   | 1,922.0868  | D                                     |                                     |  |
| Stock                               |                        |   |                                 |   |                       |                        | (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.

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

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transact:<br>Code<br>(Instr. 8) | 5.<br>orNumber<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, |                     | ate                | Secur | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|---------------------------------------|--|---------------------|--------------------|-------|--|---|---|
|   |   |   |   | Code V                                | 4, and 5)<br>(A) (D)   | Date<br>Exercisable | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |   |

## **Reporting Owners**

| Reporting Owner Name / Address   |          | Relationsh |         |       |  |  |  |  |
|--|----------|------------|---------|-------|--|--|--|--|
|  | Director | 10% Owner  | Officer | Other |  |  |  |  |
| SCALZO JOSEPH<br>C/O GILLETTE COMPANY<br>PRUDENTIAL TOWER BUILDING<br>BOSTON, MA 02199 | Х        |            |         |       |  |  |  |  |
| Signatures   |          |            |         |       |  |  |  |  |
| /s/ Tamara S. Feldman, By Power of Attorney  |          | 01/06/20   | )05     |       |  |  |  |  |
| **Signature of Reporting Person  |          | Date       |         |       |  |  |  |  |
| Explanation of Responses:  |          |            |         |       |  |  |  |  |

## 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).
- These shares are reinvested dividends and were acquired by the reporting person pursuant to the Corporation's Directors Deferred (1) Compensation 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.