HAWTHORN BANCSHARES, INC.

Form 4

September 25, 2008

OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB** 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **SMITH JAMES E/MO** Issuer Symbol HAWTHORN BANCSHARES, (Check all applicable) INC. [HWBK] (Last) (First) (Middle) 3. Date of Earliest Transaction _X__ Director 10% Owner X_ Officer (give title Other (specify (Month/Day/Year) below) 517 SOUTH SECOND STREET 09/22/2008 Chairman & CEO

4. If Amendment, Date Original

Filed(Month/Day/Year)

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(Street)

(City)	(State)	(Zip) Table	e I - Non-D	Derivative Securities Ac	equired, Disposed	of, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock					20,973.2124	D (1)	
Common Stock					200	I	Shares Held in IRA
Common Stock					400	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 contained in this form are not required to respond unless the form

SEC 1474

(9-02)

6. Individual or Joint/Group Filing(Check

X Form filed by One Reporting Person ____ Form filed by More than One Reporting

Applicable Line)

Person

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	Secu	Derivurities uired or cosed tr. 3,	ative es d	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A	A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option (right to buy)	\$ 16.33							12/04/2001	12/04/2010	Common Stock	7,959
Employee Stock Option (right to buy)	\$ 18.67							02/14/2003	02/14/2012	Common Stock	7,500
Employee Stock Option (right to buy)	\$ 26.57							03/03/2004	03/03/2013	Common Stock	8,323
Employee Stock Option (right to buy)	\$ 35.25							02/19/2005	02/19/2014	Common Stock	7,376
Employee Stock Option (right to buy)	\$ 28.45							04/21/2006	04/21/2015	Common Stock	9,561
Employee Stock Option (right to buy)	\$ 29.95							03/03/2007	03/03/2016	Common Stock	9,516

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Employee Stock Option (right to buy)	\$ 33.5					04/27/2008	04/27/2017	Common Stock	9,656
Employee Stock Option (right to buy)	\$ 21.01	09/22/2008	09/22/2008	A	9,519	09/22/2008(2)	09/22/2018	Common Stock	9,519

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SMITH JAMES E/MO 517 SOUTH SECOND STREET CLINTON, MO 64735	X		Chairman & CEO				

Signatures

/s/ James E. Smith, by Kathleen L. Bruegenhemke
P.O.A.

**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).
- (1) Includes shares acquired since last report pursuant to Company DRIP program.
- (2) All options are non-qualified and vest immediately upon grant.

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.

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