HMN FINANCIAL INC

Form 4

March 12, 2007

FORM 4

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

OMB 3235-0287 Number:

Estimated average

burden hours per

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

See Instruction 1(b).

STOCK

(Print or Type Responses)

1. Name and Address of Reporting Person * BENSON DUANE D			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			HMN F	INANCL	AL INC [HMNF]	(0	Check all appl	icable)		
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ransaction					
RR2 BOX 3			(Month/D	•		X Director		_ 10% Owner _ Other (specify		
KKZ DUA 3			03/12/20)07		below)	belov			
(Street)			4. If Amendment, Date Original			6. Individual	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)			Applicable Line)				
LANESBORO, MN 55949						_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table	e I - Non-E	Derivative Securities A	cquired, Dispose	ed of, or Bene	eficially Owned		
1.Title of	2. Transaction D	Date 2A. De	emed	3.	4. Securities	5. Amount of	6.	7. Nature of Indirect		
Security	(Month/Day/Ye	ar) Executi	ion Date, if	Transacti	orAcquired (A) or	Securities	Ownership	Beneficial Ownership		
(Instr 3)		anv		Code	Disposed of (D)	Beneficially	Form:	(Instr 4)		

1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transaction	4. Securi		or	5. Amount of Securities	6. Ownership	7. Nature of Indirect Beneficial Ownership
(Instr. 3)	(, , , , , , , , , , , , , , , , , , ,	any (Month/Day/Year)	Code (Instr. 8)	Disposed (Instr. 3,	of (D))	Beneficially Owned Following	Form: Direct (D) or Indirect	(Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
COMMON STOCK	03/12/2007		M	6,774	D	\$ 13	14,400	D	
COMMON							4,250	I	SPOUSE-MELISSA

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

BENSON

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

Edgar Filing: HMN FINANCIAL INC - Form 4

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)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	cive Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
OPTION TO BUY	\$ 13	12/26/2006		M	3,174	04/22/2001	04/22/2007	COMMON STOCK	3,174
OPTION TO BUY	\$ 13	12/26/2006		M	3,600	04/22/2002	04/22/2007	COMMON STOCK	3,600

Reporting Owners

Reporting Owner Name / Address	Relationships						
Fg	Director	10% Owner	Officer	Other			
BENSON DUANE D							
RR2 BOX 3	X						
LANESBORO, MN 55949							

Signatures

/S/ Jon Eberle, BY POWER OF ATTORNEY FOR DUANE
BENSON
03/12/2007

**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.

Reporting Owners 2