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| Buick Mike Form 4 February 26, FORM Check this if no long subject to Section 10 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | 4 UNITE s box er 6. f f f f f f f f f f led Section | EMENT O pursuant to 17(a) of the | Was F CHAN Section 10 | shington, GES IN I SECUR 6(a) of the ility Hold | D.C. 205 BENEFI ITIES e Securiti ling Com | 5 49 CIAI es Ex pany | L OW the chang Act of | COMMISSION NERSHIP OF e Act of 1934, f 1935 or Sectio 40 | OMB Number: Expires: Estimated a burden hou response | irs per | |
|---|---|--|--|---|---|--------------------------------------|-----------------------------|--|--|-----------|--|
| (Print or Type R | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Buick Mike | | | 2. Issuer Name and Ticker or Trading Symbol SunOpta Inc. [STKL] | | | | g | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Ch | | | | | (Cheo | eck all applicable) | | |
| 7301 OHMS LANE SUITE 600 | | | (Month/Day/Year) 02/22/2018 | | | | | Director 10% Owner X Officer (give title Other (specify below) below) SVP, Beverage and Snack | | | |
| | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| EDINA, MN | N 55439 | | | | | | | Person | More than One R | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | ecurit | ties Acc | uired, Disposed o | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction (Month/Day/Y | ear) Execution any | emed on Date, if /Day/Year) | Code (Instr. 8) | on(A) or Dis (D) (Instr. 3, 4 | sposed 4 and 3 (A) or | Î of 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common | 02/22/2010 | | | Code V M | Amount | (D) | Price | | D | | |
| Shares | 02/22/2018 | | | IVI | 12,000 | А | <u>(1)</u> | 12,000 | D | | |
| Common Shares | 02/22/2018 | | | F | 4,308 | D | \$7 | 7,692 | D | | |

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

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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) | 5. Number of tiorDerivative Securities 3) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | Derivative Expiration Date (Month/Day/Year) Acquired (A) r Disposed of D) Instr. 3, 4, | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. 1 De Sea (In |
|---|---|---|---|--|---|------|---|--------------------|---|-------------------------------------|--------------------------|
| | | | | Code V | (A) (| (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Restricted Stock Units | (1) | 02/22/2018 | | М | 12 | ,000 | (2) | (2) | Common Shares | 12,000 | |

Reporting Owners

| Reporting Owner Name / Address | | | Relationships | |
|---|----------|-----------|-------------------------|-------|
| | Director | 10% Owner | Officer | Other |
| Buick Mike 7301 OHMS LANE SUITE 600 EDINA, MN 55439 | | | SVP, Beverage and Snack | |
| | | | | |

Signatures

/s/ Jill Barnett, attorney-in-fact 02/26/2018

**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) Restricted Stock Units convert into common shares on a one-for-one basis.
- (2) On February 22, 2017 the reporting person was granted 12,000 restricted stock units, vesting on the first anniversary of the grant date.

Remarks: EXHIBIT LIST:

Exhibit 24 - Power of Attorney

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.