(Last)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

| ton D.C. 20540 | |
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| yton, D.C. 20549 | OMB APPROVAL |
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OMB Number: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Estimated average burden hours per response: Filed nursuant to Section 16(a) of the Securities Eychange Act of 1934

| | Check this box if no longer subject to |
|---|--|
| ٦ | Section 16. Form 4 or Form 5 obligations may continue. See |
| J | obligations may continue. See |
| | Instruction 1(b) |

(First)

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| instruction 1(b). | or Section 30(h) of the Investment Company Act of 194 | |
|--|---|--|
| . Name and Address of Reporting Person [*] Bratel Dean | 2. Issuer Name and Ticker or Trading Symbol TWIN DISC INC [TWIN] | 5. Relationship of (Check all applica Director |

| | (Check all applicable) | | | | | | | | | | | | |
|--------------------|------------------------|----------------------------|-----------------------|--|--|--|--|--|--|--|--|--|--|
| Director 10% Owner | | | | | | | | | | | | | |
| | X | Officer (give title below) | Other (specify below) | | | | | | | | | | |
| | | VP-Global Sal | es & Marketing | | | | | | | | | | |
| | | | | | | | | | | | | | |

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| TWIN DISC, INC. 1328 RACINE ST. | | | | /2015 | | | VP-Global Sales & Marketing | | | | | |
|------------------------------------|-----------------|----------------|----------------|-------------------|----------------|---------------------|-----------------------------|--|------------------------------|-----------------------|--|--|
| (Street) RACINE (City) | WI (State) | 53403 (Zip) | 4. If An | nendment, Date of | Original Filed | (Month/Day/Year) | 6. Indi Line) X | vidual or Joint/Grou Form filed by On Form filed by Mo Person | e Reporting Pers | son | | |
| 1. Title of Secur | rity (Instr. 3) | Table I - Non | 1-Derivative S | ecurities Acqu | uired, Disp | Oosed of, or Benefi |) or | Owned 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect | | |

3. Date of Earliest Transaction (Month/Day/Year) 07/31/2015

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
|---------------------------------|--------------------------------------|---|-------|---|-----------|---|---|---|---|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock ⁽¹⁾ | 07/31/2015 | | A | | 7,862 | A | \$15.9 | 33,731 | D | |
| Common Stock | | | | | | | | 2,497.5308 | I | 401(k) |
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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
|---|--|---|--|---|------------------------------|---|---|---|---|--------------------|--|--|---|--|--|--|
| [| L. 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. Transa Code (8) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr | rative rities pired r osed) | 6. Date Exerc Expiration Da (Month/Day/\) | ate | 7. Title Amour Securi Under Deriva Securi and 4) | nt of ties lying tive ty (Instr. 3 | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Award of Restricted Stock for no cash consideration pursuant to the Twin Disc, Incorporated 2010 Long Term Incentive Compensation Plan as amended. Grant will vest 100% on 7/31/2018.

/s/ Dean J. Bratel

08/04/2015

** Signature of Reporting Person

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

- * 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.

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 Number.