FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
	hours per response:	0.5							

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BATTEN JOHN H						2. Issuer Name and Ticker or Trading Symbol TWIN DISC INC [TWIN]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BALLE	2 2.33 M.O. [1]										X Direc	ctor		X 10%	Owner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)									X Offic belov	•		belov	r (specify v)	
TWIN DISC, INC.						12/14/2015										d CEO				
1328 RACINE ST.																				
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
RACINE WI 53403															X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(St	ate) (Zip)												Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Dat				Date	. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)							es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	Code V Amount		(A) (D)	or P	rice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock				12/14/2015				J ⁽¹⁾		45,440	A	\	\$0	45	45,440		I	As Trustee		
Common Stock															150),478		D		
Common Stock															2,457	7.2805		I	401(k)	
Common Stock															45	,440			As Trustee ⁽²⁾	
Common Stock														44,960				As Trustee ⁽³⁾		
Common Stock														428,969.6		I		As Trustee ⁽⁴⁾		
Common Stock														10,400		I		As Trustee ⁽⁵⁾⁽⁶⁾		
		Та									osed of, o				Owned					
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			ransaction of Ode (Instr.) Secu Acqu (A) o Disp of (D (Instr. and 5			itive ities red sed 3, 4	6. Date I Expiration (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		S (I	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code V	,	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Num of Share	per						

Explanation of Responses:

- 1. Reflects reporting person's appointment as trustee of the John H. Batten and Katherine V. Batten Family Trust, dated December 13, 1976, and the Batten Family Trust, dated October 21, 1988. Shares were transferred on January 8, 2016 to the Louise Vernet Batten Grantor Trust, for which reporting person serves as trustee.
- 2. As trustee of Elizabeth Batten Stribney Trust.
- 3. As trustee of Timothy Michael Batten Trust.
- 4. As trustee of Michael E. Batten Trust.
- 5. As trustee of Gloria S. Batten Trust.
- 6. Reporting person is also trustee and guardian over 1,956,456 shares of common stock held for the benefit of non-immediate family members, for which Section 16 reporting is not required.

/s/ John H. Batten

03/02/2016

** Signature of Reporting Person

Date

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.