FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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

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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* RESCORLA CHARLES L						2. Issuer Name and Ticker or Trading Symbol GRACO INC [GGG]								eck all appl Direct	or	g Pers	10% Ow	ner
(Last) (First) (Middle) 88 11TH AVENUE NE					3. Date of Earliest Transaction (Month/Day/Year) 11/03/2015								X Officer (give title Other (special below) Vice President					
(Street) MINNEAPOLIS MN 55413				4.	4. If Amendment, Date of 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 Person					
(City)	(\$		(Zip)															
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				tion	n 2A. Deemed Execution D		d Date,	3. Transaction Code (Instr.		4. Securities Disposed Of	Acquired	(A) or	5. Amo Securit Benefic Owned	unt of ies cially Following	Form	: Direct C Indirect E str. 4)	'. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D)	Price	Report Transa (Instr. 3	tion(s)		1	Instr. 4)
Common Stock 11/03/20				2015	15					22,500	A	\$40.68	8	3,657		D		
Common Stock 11/03				11/03/2	2015				S		22,500	D	\$75.5054	.(1) 61	,157 ⁽²⁾		D	
Common Stock												2,10	4.7531 ⁽³⁾		I b	y ESOP		
			Table								posed of, , converti			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	emed ion Date, /Day/Year)	4. Transa Code (8)			vative irities iired r osed) (Instr.	Expira	te Exerc ation D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		is Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares					
Non- qualified Stock Option (Right to	\$40.68 ⁽⁴⁾	11/03/2015			M			22,500	(-	4)	02/17/2016	Common Stock	22,500	\$0	0		D	

Explanation of Responses:

Buy)

- 1. The price reported in Column 4 is a weighted average price. The shares were sold at prices ranging from \$75.08 to \$75.73, inclusive. The reporting person undertakes to provide Graco Inc., any security holder of Graco Inc., or the staff of the Securities and Exchange Commission, upon request, with full information regarding the number of shares sold at each separate price within the range set forth in the footnote.
- 2. Includes shares acquired under Graco Employee Stock Purchase Plan, exempt under Rule 16b-3.
- 3. Included in the amount of ESOP shares are dividends paid pursuant to the Graco Employee Stock Ownership Plan, exempt under Rule 16b-3(c).
- 4. Employee stock option granted pursuant to the Graco Inc. Stock Incentive Plan in transaction exempt under Rule 16b-3. The stock option becomes exercisable in four equal annual installments, commencing one year after the date of the grant.

/s/ Francis J. Brixius Jr.,

attorney-in-fact for Mr.

11/04/2015

Date

Rescorla

** 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.