FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL
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OMB Number: 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*					2. Issuer Name <b>and</b> Ticker or Trading Symbol GRACO INC [ GGG ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
MORFITT MARTHA A M													-	X Directo	or		10% Ow	/ner
(Last)	(Fi	rst)	(Middle)				e of Earliest Transaction (Month/Day/Year) L/2018							Officer below)	(give title		Other (s below)	pecify
88 11TH AVENUE NE						0.702,2020												
							4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable				
(Street)													- 1	X Form filed by One Reporting Person				
MINNEAPOLIS MN 55413												_						
				-									Form filed by More than One Reporting Person					
(City)	(SI	tate)	(Zip)															
		Tab	le I - Nor	n-Deriv	vativ	e Se	curities	Ac	quired, D	ispose	ed o	f, or Be	neficial	ly Owned	l			
1 Title of 9	Security (Inst			2. Trans			2A. Deeme		3.	<u> </u>		ies Acquire		5. Amou		6. Ov	nership	7. Nature
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						ar)	Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)			Of (D) (Ins		Securitie Benefici	es F ally (I	Form (D) or	Form: Direct D) or Indirect I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
						′ <del>'</del>			_		(A) or Dri		Reporte	d Ĭ	, I.,,			
									Code V	Amo	Amount (A) (D)		Price	(Instr. 3				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
				(e.g., p	outs,	call	s, warra	ants	, options	, conv	ertil	ole secu	ırities)					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)		and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	is Silly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Ī									Amount	1				
										L .	.		Number					
					Code	v	(A)	(D)	Date Exercisable	Expira Date	ition	Title	of Shares					
Phantom Stock Units	(1)	07/01/2018			A <sup>(2)</sup>		414.64		(1)	(1)		Common Stock	414.64	\$45.22	97,889.78	37 <sup>(3)</sup>	D	

## **Explanation of Responses:**

- 1. The Phantom Stock Units were accrued under the Graco Inc. 2015 Stock Incentive Plan and are to be settled 100% in Graco common stock in a lump sum or installments upon reporting person's termination of service on the Board.
- 2. Shares of Graco Inc. phantom stock received in lieu of retainer and meeting fees.
- 3. The number of Phantom Stock Units includes Phantom Stock Units acquired under the Graco Inc. Automatic Dividend Reinvestment Plan (DRIP), exempt under Rule 16a-11.

/s/ Francis J. Brixius Jr., 07/02/2018 attorney-in-fact for Ms. Morfitt

\*\* 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.