FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* MCHALE PATRICK J | | | | | | 2. Issuer Name and Ticker or Trading Symbol GRACO INC [GGG] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
|---|---|--|---|--------|---------|---|---|-----------|-----------------------------------|---------------------------|----------------------------|---|--|---|---|---|---|--|
| (Last) (First) (Middle) 88 11TH AVENUE NE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/12/2015 | | | | | | | | X Officer (give title Other (specify below) President and CEO | | | | pecify |
| (Street) MINNEAPOLIS MN 55413 | | | | | 4. 1 | If Ame | endme | ent, Date | of Original Filed (Month/Da | | | Line) | | e) X Form f Form f | | | porting Person | |
| (City) | (| State) | (Zip) | n Dori | vativ | o So | ouri | tios Ac | auirad | Dic | nocod o | of or Po | noficial | lly Owned | 1 | | | |
| Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | saction | ear) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) | | ed (A) or | 5. Amount of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transaci (Instr. 3 | tion(s) | | - | Instr. 4) |
| Common Stock 11/12 | | | | | 2/201 | 2015 | | | F | 58, | | 9 D | \$74.7 | 76 16 | 5,959 | | D | |
| Common Stock 11/1 | | | | 11/1 | 2/201 | 2/2015 | | | | | 75,00 | 0 A | \$40.5 | 40.53 91,959 ⁽¹⁾ | | I | D | |
| Common Stock | | | | | | | | | | | | | | 1,854 | 1,854.3128 ⁽²⁾ | | | By ESOP |
| | | | Table II - | | | | | | | | | or Bend ble secu | | / Owned | | | | |
| 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/Da | Date, | | Transaction Code (Instr. | | | | xercis in Dat ay/Ye | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly C | .0. Ownership Form: Direct (D) or Indirect I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Non- qualified Stock Option (Right to Buy) | \$40.53 | 11/12/2015 | | | M | | | 75,000 | (3) | | 06/14/2017 | Common Stock | 75,000 | \$0 | 0 | | D | |

Explanation of Responses:

- 1. Included in the amount reported are shares acquired under Graco Inc. 2006 Employee Stock Purchase Plan, exempt under Rule 16b-3.
- 2. The number of ESOP Stock Units includes ESOP Stock Units acquired in unreported dividend reinvestment transactions.
- 3. Employee stock option granted pursuant to the Amended and Restated Graco Inc. Stock Incentive Plan (2006) 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. McHale

11/13/2015

** 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.