SunOpta Inc. Form 3 January 27, 2016

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement SunOpta Inc. [STKL] THYKEN MICHAEL J (Month/Day/Year) 01/18/2016 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 7301 OHMS LANE, SUITE 600 (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) 10% Owner Director _X_ Form filed by One Reporting _X__ Officer Other Person (give title below) (specify below) EDINA, MNÂ 55439 Form filed by More than One Chief Information Officer Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) D Â Common shares 20,000 Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. 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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	Derivative Security 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect		

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			Shares		(I) (Instr. 5)	
Stock options	(1)	08/07/2023 Comm Shares	7/500	\$ 8.23	D	Â
Stock options	(2)	05/13/2024 Comm Shares	6 U/I')	\$ 11.3	D	Â
Stock options	(3)	05/12/2024 Comn Shares	10 188	\$ 10.08	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships				
reporting of their trainer, readers	Director	10% Owner	Officer	Other	
THYKEN MICHAEL J 7301 OHMS LANE, SUITE 600 EDINA, MN 55439	Â	Â	Chief Information Officer	Â	

Signatures

/s/ Michael Thyken	01/27/2016		
**Signature of Reporting Person	Date		

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) These options became or will become exercisable in five equal annual installments on each of August 7, 2014, 2015, 2016, 2017 and 2018. These options qualify as incentive stock options.
- These options became or will become exercisable in five annual installments. The first installment of 1,388 options became exercisable on May 13, 2015. The second installment of 1,389 options will become exercisable on May 13, 2016. The third installment of 1,388 options will become exercisable on May 13, 2017. The fourth installment of 1,389 options will become exercisable on May 13, 2018. The fifth installment of 1,388 options will become exercisable on May 13, 2019. These options qualify as incentive stock options.
- These options will become exercisable in five annual installments. The first installment of 2,038 options will become exercisable on May 12, 2016. The second installment of 2,037 options will become exercisable on May 12, 2017. The third installment of 2,038 options will become exercisable on May 12, 2019. The fifth installment of 2,038 options will become exercisable on May 12, 2020. These options qualify as incentive stock options.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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