FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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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

| Name and Address of Reporting Person* Powell Andrew Kenneth William | | | | | | 2. Issuer Name and Ticker or Trading Symbol LANDEC CORP \CA\ [LNDC] | | | | | | | | | | | p of Reportin blicable) ctor | ig Perso | n(s) to Is | | | |
|--|-----|--------|-----------|--|-------|--|---|-------|-----------------|--|---------------------|--|-------|---------|---|---|--|--|---|---|--|--|
| (Last) (First) (Middle) C/O LANDEC CORPORATION | | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/11/2019 | | | | | | | | | | er (give title v) | | Other below) | (specify | | |
| 5201 GREAT AMERICA PARKWAY, SUITE 232 (Street) | | | | | | | 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 | | | | | | |
| SANTA CLARA CA 95054 | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Sec | curitie | s Acq | quired, | Dis | posed o | f, or | r Ben | eficia | ally | Owne | ed | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ur) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dis | | Disposed | Securities Acquired (A) isposed Of (D) (Instr. 3, 4) | | | 4 and Se Be Ov | | Securities Beneficially | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | v | Amount | | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | | (11150.4) | | | |
| Common Stock 01/11/ | | | | | | | | | P | | 525 | | A | \$11.62 | | 2 1,000 | | I |) | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Ov | vned | | | | | | |
| Derivative Security or Exercise (Instr. 3) Price of Derivative Security Derivative Security Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | | | Fransaction of Code (Instr. De S) Se Ac (A Di of | | ative rities ired osed . 3, 4 | 6. Date Exercis Expiration Date (Month/Day/Ye | | е | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of | | ount | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Dire or I (I) (| nership m: ect (D) ndirect Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |

Explanation of Responses:

/s/ Rebecca J Hilt

01/14/2019

** 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.