FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
OV	IB Number:	3235-0287								
Es	Estimated average burden									
ll ho	ire per recoence	. 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* <u>DUCHENE KATE W</u>						2. Issuer Name and Ticker or Trading Symbol RESOURCES CONNECTION INC [ RECN ]							CN (Ch	eck all applic	able)	10% Owner		ner
(Last) (First) (Middle) 17101 ARMSTRONG AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 09/07/2016								below)		ficer	below)		
(Street) IRVINE (City)	C.		92614 (Zip)		- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					saction	Execution Date,			3. Transacti Code (Ins	3. 4. Securities Disposed Of Code (Instr. 5)			f, or Beneficial ties Acquired (A) or I Of (D) (Instr. 3, 4 and		nt of s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
							Code V	-	Amount (A) or (D)		Price	Reported Transact (Instr. 3 a	ction(s)			(Instr. 4)		
		-							uired, Dis , options,					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Execution (Month/Day/Year) if any	3A. Deemed Execution D if any (Month/Day)	Date,	4. Transa Code (I 8)		of		6. Date Exercisable a Expiration Date (Month/Day/Year)			and 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	re es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Exp	piration te	Title	Amount or Number of Shares					
Non- Qualified Stock Option (right to	\$15.1	09/07/2016			A		38,000		(1)	09/0	07/2026	Common Stock	38,000	\$0.0	38,000	0	D	

## **Explanation of Responses:**

1. Options vest 25% a year from date of grant.

By: Judy Gagnon For: Kate W **Duchene** 

09/16/2016

\*\* 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.