CAL MAINE FOODS INC

Form 4

October 09, 2007

FORM 4

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

OMB Number: 3235-0287

burden hours per

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

response...

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * COLLINS CHARLES F				Symbol		Ficker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			CAL MA	INE FO	DDS INC [CALM]	(Check all applicable)					
	(Last)	(First)	(Middle)	3. Date of H	Earliest Tra	nsaction					
101 OAKHURST DRIVE			(Month/Day	y/Year)		Director	10%				
			10/05/200	07		X Officer (give title Other (specify below)					
							· · · · · · · · · · · · · · · · · · ·	esident, Contro	ller		
(Street)				4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
				Filed(Month/Day/Year)			Applicable Line)				
							X Form filed by One Reporting Person				
CLINTON, MS 39056						Form filed by More than One Reporting Person					
	(City)	(State)	(Zip)	rivative Securities Acq	Acquired, Disposed of, or Beneficially Owned						
	1.Title of	2. Transaction	Date 2A. D	eemed	3.	4. Securities Acquired	5. Amount of	6.	7. Nature		
Security (Month/Day/Year) Execution				tion Date, if	Transacti	or(A) or Disposed of (D)) Securities	Ownership	Indirect		

• •		1 able 1	- Non-Dei	iivauve S	ecuri	ies Acqui	reu, Disposeu or,	or benefician	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	(A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK	10/05/2007		S	5,000	D	\$ 26.75	5,621	I	By IRA
COMMON STOCK	10/05/2007		S	5,621	D	\$ 27	0	I	By IRA
COMMON STOCK	10/05/2007		S	5,000	D	\$ 26.75	37,610	D	
COMMON STOCK							585	I	By ESOP

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and A Underlying S (Instr. 3 and	Securities	8 I S (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (right to buy)	\$ 5.93					08/17/2006(1)	08/17/2015	Common Stock	30,000	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

COLLINS CHARLES F 101 OAKHURST DRIVE CLINTON, MS 39056

Vice President, Controller

Signatures

/s/ Peter E. Panarites, Attorney-in-Fact

10/09/2007

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) The stock option became exercisable to the extent of 20% on 8/17/06 and is cumulatively exercisable to the extent of 20% each year thereafter.

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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