Edgar Filing: SPILMAN ROBERT H JR - Form 4

SPILMAN F Form 4	ROBERT H JR										
January 22, 2	2018										
	Л								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check th if no long	7.0 r					- ~-			Expires:	January 31, 2005	
subject to Section 1 Form 4 o	F CHANGES IN BENEFICIAL OW SECURITIES					NERSHIP OF	Estimated average burden hours per response				
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a	a) of the l	Public U	tility Ho		npan	iy Act o	e Act of 1934, f 1935 or Section 40			
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> SPILMAN ROBERT H JR			2. Issuer Name and Ticker or Trading Symbol BASSETT FURNITURE					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			INDUS	TRIES I	NC [BSE	[T]		(check an appreadic)			
(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 3525 FAIRYSTONE PARK HWY, P 01/18/2018							_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chairman & CEO				
O BOX 626)							C.I.M.			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
BASSETT,	VA 24055							Form filed by Me Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acc	uired, Disposed of,	or Beneficiall	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	Code (Instr. 8)	4. Securi or(A) or Di (Instr. 3, Amount	spose	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	01/18/2018			А	6,000 (1)	A	\$ 35.55 (2)	181,679.4078 (<u>3)</u>	D		
Common Stock								16,857	Ι	Spouse	
Common Stock								13,947	I	Lucy Bassett Trust	

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Owne
	Security				Acquired						Follo
	-				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or 1		
						Exercisable	Date		Number		
					(1) (5)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Addr	·ess	Relationships						
	Director	10% Owner	Officer	Other				
SPILMAN ROBERT H JR 3525 FAIRYSTONE PARK H P O BOX 626 BASSETT, VA 24055	WY X		Chairman & CEO					
Signatures								
/s/ Robert H. Spilman, Jr.	01/22/2018							

Explanation of Responses:

If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Restriction on sale and risk of forfeiture until vesting (2020-01-23) or earlier upon death or disability. Also subject to stock ownership (1) guidelines.
- (2) Price of Bassett Furniture Industries Stock at the close of business 01/18/2018.
- (3) Includes shares acquired under the 2000 Employee Stock Purchase Plan in transactions exempt under Rule 16-3(A).

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.

**Signature of Reporting

Person