FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL			
	OMB Number:	3235-0287			
l	Estimated average burd	en			
l	hours per response:	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

	id Address of i Michael	2. Issuer Name <b>and</b> Ticker or Trading Symbol HOOKER FURNITURE CORP [ HOFT ]										Check al	onship of Reportir all applicable) Director Officer (give title		10%	Owner			
(Last) (First) (Middle) C/O HOOKER FURNITURE CORPORATION POB 4708							3. Date of Earliest Transaction (Month/Day/Year) 06/21/2018										Officer (give title below)  President HF Legacy		
(Street)  MARTINSVILLE VA 24115  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)										ne) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
		Tabl	e I - Nor	า-Deriva	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	eficia	ally O	wned	d		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Da			3. Transaction Code (Instr. 8)						nd S B O	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount		A) or D)	Price	Ti	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 06/21/							2018		S		200		D	\$49		6,362		D	
Common Stock 06/21/.							2018		S		864		D	\$49.05		5,498		D	
		Та	ble II - D								sed of, onvertib				y Owr	ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, Trans					6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount nber	8. Price Derivat Securit (Instr. §	ive d y S i) E F F	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)

Explanation of Responses:

\s\ Robert W. Sherwood

Attorney in Fact for Michael 06/22/2018

Date

W. Delgatti

\*\* Signature of Reporting Person

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).