FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028	

87 Estimated average burden 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

1. Name and Address of Reporting Person* Delgatti Michael W (Last) (First) (Middle) C/O HOOKER FURNITURE CORPORATION POB 4708 (Street) MARTINSVILLE VA 24115				3. E 12/	2. Issuer Name and Ticker or Trading Symbol HOOKER FURNITURE CORP [HOFT] 3. Date of Earliest Transaction (Month/Day/Year) 12/21/2017 4. If Amendment, Date of Original Filed (Month/Day/Year)									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(City)			24115 Zip)												Form filed by More than One Reporting Person				porting
1. Title of Security (Instr. 3)			2. Transaction Date			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Trans Code 8)	3. Transaction Code (Instr. 8)		5) (A) or			5. Amount of 4 and Securities Beneficially Owned Followin Reported Transaction(c)		ount of ities icially d Following ted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock			12/21/2017		7			Code	V	Amount 853	(D)		Price \$42	(Instr.		7,972	D		
Common Stock			12/21/2017		-			S		1,005		D	\$42.8		16,967		D		
				12/22/2017 12/22/2017		-			S		870 D 4,119 D					1,978	D D		
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)	rivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		Date,	4. Transa Code (8)	ansaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expirati (Month)	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date			Amount of Securities Underlying Derivative Security (Instr. and 4) Amount of Mount of Number Number 1 Number 1 Number 1 New York Number 1		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

\s\ Robert W. Sherwood

Attorney in Fact for Michael

W. Delgatti

** Signature of Reporting Person Date

12/22/2017

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.

^{*} 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).