Huckfeldt Paul A Form 4 May 08, 2018

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

Number: 3233-0287 Expires: January 31,

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

(Street)

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

below)

Huckfeldt Paul A

Symbol
HOOKER FURNITURE CORP

(Check all applicable)

[HOFT]

(Middle)

3. Date of Earliest Transaction

____ Director _____ 10% Owner _____ Nother (give title _____ Other (specify

(Month/Day/Year)

05/07/2018

below) Chief Financial Officer

C/O HOOKER FURNITURE CORPORATION, POB 4708

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person ___ Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

MARTINSVILLE, VA 24115

(City) (State) (Zip) **Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**1.Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. Ownership 7. Nature

Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any

TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Form: Di Beneficially (D) or Owned Indirect (Following (Instr. 4)

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

Transaction(s) (Instr. 3 and 4)

Reported

Code V Amount (D) Price

16 105 D

Common Stock

16,105 D

Common Stock

2,000.94 I BY 401K

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

(Month/Day/Year)

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SEC 1474

(9-02)

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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)		4. Transact Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D)		Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Deriva Securit (Instr. :
				Code V	and 5)	ŕ	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit (RSU)	(1)	05/07/2018		A	800		(2)	(2)	Common Stock	800 (3)	\$ (

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Huckfeldt Paul A C/O HOOKER FURNITURE CORPORATION POB 4708 MARTINSVILLE, VA 24115

Chief Financial Officer

Signatures

\s\ Robert W. Sherwood Attorney in Fact for Paul A. Huckfeldt

05/08/2018 Date

**Signature of Reporting Person

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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) Each RSU represents a contingent right to receive one share of HOFT common stock.
- (2) The RSUs will vest 100% if the reporting person remains continuously employed with the issuer through May 7, 2021 and will be paid as soon as administratively practical thereafter.
- (3) At the direction of the issuer's Compensation Committee, the RSUs may be paid in shares of HOFT common stock, cash (based on the fair market value of a share of HOFT common stock on the date payment is made) or both.

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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