Cohenour Bruce Form 4 July 18, 2017

FORM 4

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

Check this box

if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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

(Print or Type Responses)

1(b).

(Last)

(City)

1. Title of

Security

(Instr. 3)

Common

Common

1. Name and Address of Reporting Person *

Cohenour Bruce

(First) (Middle)

P O BOX 626, 3525 FAIRYSTONE **PARK HWY**

(Zip)

2. Transaction Date 2A. Deemed

(Street)

(State)

07/17/2017

(Month/Day/Year)

BASSETT, VA 24055

2. Issuer Name and Ticker or Trading

Symbol

BASSETT FURNITURE **INDUSTRIES INC [BSET]**

3. Date of Earliest Transaction

(Month/Day/Year) 07/17/2017

4. If Amendment, Date Original

Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities Acquired 5. Amount of Execution Date, if Transaction(A) or Disposed of

(Instr. 8) (Month/Day/Year)

Code (D) (Instr. 3, 4 and 5)

(A) or

Code V Amount (D) Price \$ D

F 490

29,824.9472 37.9 (1) (2)

7,852.3764

5. Relationship of Reporting Person(s) to

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

Issuer

Person

Securities

Following

Reported

Transaction(s)

(Instr. 3 and 4)

Owned

Beneficially

(Check all applicable)

Director 10% Owner X_ Officer (give title Other (specify below)

below)

SR VP, SALES & MERCHANDISING

6. Individual or Joint/Group Filing(Check

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

D

I

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

Indirect (I) Ownership (Instr. 4) (Instr. 4)

Spouse

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

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.

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative		e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities Acquired			(Instr. 3	3 and 4)		Own
	Security										Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
					Date	Date	Expiration	Or Title Nesselves			
						Exercisable Date	Date		Number		
				C + V	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

Officer Other Director 10% Owner

Cohenour Bruce P O BOX 626 3525 FAIRYSTONE PARK HWY BASSETT, VA 24055

SR VP, SALES & MERCHANDISING

Signatures

BRUCE R

COHENOUR 07/18/2017

**Signature of Reporting 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) Includes shares acquired under the 2017 Employee Stock Purchase Plan in transactions exempt under Rule 16-3(A).
- (2) Price of Bassett Furniture Industries Stock at the close of business 07/17/17.

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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