Hoff Jeremy R Form 4 May 08, 2018

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

2005

0.5

Check this box if no longer subject to Section 16.

January 31, Expires:

> Estimated average burden hours per

> > 10% Owner

Other (specify

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

response...

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).

(Print or Type Responses)

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading

Issuer

Hoff Jeremy R

HOOKER FURNITURE CORP

(Check all applicable)

below)

5. Relationship of Reporting Person(s) to

[HOFT]

Symbol

(Last)

3. Date of Earliest Transaction

Director X_ Officer (give title

(First) (Middle)

(Month/Day/Year) below) 05/07/2018 President

HOOKER FURNITURE CORPORATION, 440 E. COMMONWEALTH **BOULEVARD**

> 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Applicable Line)

Filed(Month/Day/Year)

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

MARTINSVILLE, VA 24112

(Street)

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) 5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported

D

(A) Transaction(s) or

433

(Instr. 3 and 4) Code V Amount (D) Price

Common 05/07/2018 Stock

(Instr. 3)

A 433 \$0 Α

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

(Month/Day/Year)

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Instr. 8	5. Number tion Derivative Securities) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day	Date	7. Title and Underlying (Instr. 3 and	Securities	8. Pr Deri Secu (Inst
				Code V	V (A) (E	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit (RSU)	(1)	05/07/2018		A	1,003	(2)	(2)	Common Stock	1,003 (3)	

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Hoff Jeremy R HOOKER FURNITURE CORPORATION 440 E. COMMONWEALTH BOULEVARD MARTINSVILLE, VA 24112

President

Signatures

Hoff 05/08/2018

**Signature of Reporting Person 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) 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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