

BASSETT FURNITURE INDUSTRIES INC
 Form 3
 August 11, 2015

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Baker David C		(Month/Day/Year)	BASSETT FURNITURE INDUSTRIES INC [BSET]	
(Last)	(First)	(Middle)	08/03/2015	
P.O. BOX 626,Â 3525		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)
FAIRYSTONE PARK HWY				
(Street)		(Check all applicable)		
BASSETT,Â VAAÂ 24055		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) SVP, Corporate Retail		6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
(City)	(State)	(Zip)		

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common	14,048	D	Â
Common	3,600 ⁽³⁾	D	Â
Common	3,000 ⁽⁴⁾	D	Â

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

SEC 1473 (7-02)

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 control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial
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	Date Exercisable	Expiration Date	Derivative Security (Instr. 4) Title	Amount or Number of Shares	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)
Option ⁽¹⁾	04/20/2008	04/19/2017	Common	5,000	\$ 14.73	D	Â
Option ⁽¹⁾	04/20/2009	04/19/2017	Common	5,000	\$ 14.73	D	Â
Option ⁽¹⁾	04/20/2010	04/19/2017	Common	5,000	\$ 14.73	D	Â
Option ⁽²⁾	07/14/2012	07/13/2021	Common	1,750	\$ 8.02	D	Â
Option ⁽²⁾	07/14/2013	07/13/2021	Common	1,750	\$ 8.02	D	Â
Option ⁽²⁾	07/14/2014	07/13/2021	Common	1,750	\$ 8.02	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Baker David C P.O. BOX 626 3525 FAIRYSTONE PARK HWY BASSETT, VA 24055	Â	Â	Â SVP, Corporate Retail	Â

Signatures

David C Baker 08/11/2015
 **Signature of Date
 Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Granted under the 1997 Employee Stock Plan which is a Rule 16b-3 Plan.
- (2) Granted under the 2010 Employee Stock Plan which is a Rule 16b-3 Plan.
- (3) Restrictions on sale and risk of forfeiture until one-third vesting if continuously employed each 07/17/2016, 07/17/2017 and 07/17/2018 or earlier upon death or retirement, also, subject to sale restriction in accordance with the Compnay's stock ownership guidelines.
- (4) Restrictions on sale and risk of forfeiture until vesting after 2 years of continuous service from issuance date (01/22/2015), or earlier upon death or retirement, also, subject to sale restriction in accordance with the Compnay's stock ownership guidelines.

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.