## Edgar Filing: HOOKER FURNITURE CORP - Form 4

HOOKER FURN Form 4 June 14, 2010	NITURE COR	P										
FORM 4										PPROVAL		
<b>CUNIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287				
Check this bo: if no longer subject to Section 16. Form 4 or	Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							burden hou	Estimated average burden hours per			
Form 5 obligations may continue. See Instruction 1(b).	Section 17(a	) of the 1		ility Hold	ling Com	ipany	Act o	ge Act of 1934, f 1935 or Sectio 40		0.5		
(Print or Type Respo	onses)											
WILLIAMSON HENRY G JR Symbol HOC			Symbol		Ticker or T			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/Da HOOKER FURNITURE 06/11/20 CORPORATION, POB 4708								X_ Director 10% Owner Officer (give title Other (specify below) below)				
	Filed(Month/Day/Year) App _X_ RTINSVILLE VA 24112				Applicable Line) _X_ Form filed by ( Form filed by M	ual or Joint/Group Filing(Check Line) filed by One Reporting Person filed by More than One Reporting						
								Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
	Transaction Date Ionth/Day/Year)	Executio		3. Transacti Code (Instr. 8) Code V	4. Securi onAcquirec Disposec (Instr. 3, Amount	l (A) o l of (D	)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common 06 Stock 06	5/11/2010			A	1,616	A	\$0	11,169	D			

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

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 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. Transactio Code (Instr. 8)	actionNumber Expiration of (Month/D			Amount of		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repo	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
WILLIAMSON HENRY G JR HOOKER FURNITURE CORPORATION POB 4708 MARTINSVILLE, VA 24112	Х						
Signatures							
\s\ Robert W. Sherwood Attorney in Fact for Williamson, Jr.	06/14/2010						
<u>**</u> Signature of Reporting Persor	1			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).

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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