FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, B.S. 20043

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHII				
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OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* CAMP JASON					<u>B</u> .	2. Issuer Name and Ticker or Trading Symbol BASSETT FURNITURE INDUSTRIES INC [BSET]							(Ch	eck all applic	cable)	Person(s) to Is 10% (
(Last) (First) (Middle) BASSETT FURNITURE INDUSTRIES, INC. P O BOX 626				3. Date of Earliest Transaction (Month/Day/Year) 02/09/2015								X Officer (give title Officer (specify below) Senior VP, Retail						
(Street) BASSET (City)	T V		24055 (Zip)		4.1	f Amer	ndment, I	Date	of Original Filed (Month/Day/Year)				Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - N	on-Deri	ivativ	e Sec	curities	s Ac	quire	d, Di	sposed o	f, or Be	neficial	ly Owned	<u> </u>			
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			Benefici Owned I	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)		(Instr. 4)			
Common			02/09	/2015	15					37,500	A	\$16.96	3) 57	,340	D			
Common		02/09	9/2015				M		22,500	A	\$16.96	³⁾ 79	,840	D				
Common		02/09	2/09/2015				M		4,000	A	\$4.38(3	83	,840	D				
Common		02/09	/2015	2015					4,000	A	\$4.38 ⁽³	87	,840	D				
Common		02/09	/2015)15		S		55,500	D	\$24.043	\$24.043 ⁽²⁾ 32		D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if a		Date	ate Execution Date,		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						
Option ⁽¹⁾	\$16.96	02/09/2015			M		37,500		07/10/	2007	07/09/2016	Common	37,500	\$16.96	0	D		
Option ⁽¹⁾	\$16.96	02/09/2015					22,500		07/10/	2008	07/09/2016	Common	22,500	\$16.96	15,000	D		
Option ⁽¹⁾	\$4.38	02/09/2015			M		4,000		07/14/	2013	07/13/2020	Common	4,000	\$4.38	0	D		

Explanation of Responses:

\$4.38

Option⁽¹⁾

1. Granted under the 1997 Employee Stock Plan which is a Rule 16b-3 Plan.

02/09/2015

- 2. Price is weighted average of multiple trades ranging from \$24.00 to \$24.22 and reporting person undertakes to provide upon request to SEC staff, the issuer or security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.
- 3. Corresponds to the exercise price of options.

Jason Camp

07/14/2014 | 07/13/2020 | Common

02/10/2015

** Signature of Reporting Person

4,000

Date

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

- * 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.

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 Number.

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