| SEC Form 4 | |
|------------|--|
|------------|--|

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 1(b). |
|--|--|
|--|--|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPR | OVAL |
|-----------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average bur | den |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting Person* FULTON PAUL | | | 2. Issuer Name and Ticker or Trading Symbol BASSETT FURNITURE INDUSTRIES | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|---------|--------------|---|--|-------------------------------|--------------------------|--|--|--|
| | | | INC BSET | | Director | 10% Owner | | | |
| (Last) | (First) | (Middle) | | x | Officer (give title below) | Other (specify below) | | | |
| BASSETT FURNITURE INDUSTRIES INC | | () | 3. Date of Earliest Transaction (Month/Day/Year) 07/15/2011 | | ne Board | | | | |
| P O BOX 626 3525 FAIRYSTONE PARK HWY | | ONE PARK HWY | | | | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Line) | vidual or Joint/Group Filir | | | | |
| BASSETT | VA | 24055 | | | Form filed by One Rep | 0 | | | |
| (City) | (State) | (Zip) | | | Person | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|------------------------------|---|--|---------------|----------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) |
| Common | 07/13/2011 | | A | | 4,200 ⁽¹⁾ | A | \$8.02 | 31,924 | D | |
| Common | 07/14/2011 | | Р | | 3,000 | A | \$8.1456 | 34,924 | D | |

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

| | 2 | | | | | 1 | | | | 3 | | - | 3 | | |
|---|---|--|---|------------------------------|---|--|---|---------------------|--------------------|---|--|---|--|--|--|
| 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. Transa Code (8) | | of Deriv Secu Acqu (A) or Dispo of (D) | erivative ecurities cquired (D) (D) sposed (D) str. 3, 4 | | | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. RESTRICTIONS ON SALE UNTIL 90 DAYS AFTER END OF SERVICE

Paul Fulton

07/15/2011

Date

** Signature of Reporting Person

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.