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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 0.5 hours per response:

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

1. Name and Address of Reporting Person* SPILMAN ROBERT H JR						2. Issuer Name and Ticker or Trading Symbol BASSETT FURNITURE INDUSTRIES INC [BSET]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
-					- <u>11</u>	<u> </u>	BSET	l						Officer	give title		Other (s		
(Last) (First) (Middle) 3525 FAIRYSTONE PARK HWY						3. Date of Earliest Transaction (Month/Day/Year) 05/13/2011								below)	2 Chief E	vocutive	below)	ar.	
														Pres & Chief Executive Officer					
P O BOX 626							andmont	Data	of Original	Eilod	(Month/D	6 In	6. Individual or Joint/Group Filing (Check Applicable						
(Street)					_ 4.	If Amendment, Date of Original Filed (Month/Day/Year)								Line)					
BASSETT VA 24055														X Form filed by One Reporting Person Form filed by More than One Reporting					
(City) (State) (Zip)					-									Person		e man On	іе Кероі	ung	
(City)	(5)		(Zip)																
			ble I - No						-	Dis	1	of, or Ben		_			[
''' ''' ',				Date	2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, ar) if any (Month/Day/Year		, Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 and 5		5. Amour Securitie Beneficia Owned F Reported	s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature o Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(111511.4)	
Common				05/1	/13/2011				P		2,90	0 A	\$8.692	8 61,	61,965				
Common													17,	17,217			wife		
Common													6,5	6,515			Trust		
												, or Bene		Owned					
	T.	Ι	1	` '	-	, cal	'					ible secur		T	I				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemer Execution I if any (Month/Day	Date,	Code (I				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivativ Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e Over State of	wnership orm: rect (D) Indirect (Instr. 4)	11. Natu of Indire Benefici Ownersi (Instr. 4)	
													Amount]					
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Number of Shares						
Option ⁽¹⁾	\$14.7	01/15/2002			A		10,000		01/15/200	3 0	1/14/2012	Common	10,000	\$14.7	10,00	0	D		
Option ⁽¹⁾	\$14.7	01/15/2002			A		10,000		01/15/200	4 0	2/14/2012	Common	10,000	\$14.7	10,00	0	D		
Option ⁽¹⁾	\$14.7	01/15/2002			A		10,000		01/15/200	5 0	1/14/2012	Common	10,000	\$14.7	10,000		D		
Option ⁽¹⁾	\$21.12	02/24/2004			A		50,000		11/15/200	4 0	2/23/2014	Common	50,000	\$21.12	50,000		D		
OPTION ⁽¹⁾	\$10.6	10/17/2007			A		7,334		10/17/200	8 1	0/16/2017	COMMON	7,334	\$10.6	7,334		D		
OPTION ⁽¹⁾	\$10.6	10/17/2007			A		7,333		10/17/200	9 1	0/16/2017	COMMON	7,333	\$10.6	7,333		D		
OPTION ⁽¹⁾	\$10.6	10/17/2007			A		7,333		10/17/201	0 1	0/16/2017	COMMON	7,333	\$10.6	7,333	3	D		
Option ⁽¹⁾	\$4.38	07/14/2010			A		6,000		07/14/201	1 0	7/13/2020	Common	6,000	\$4.38	6,000		D		
Option	\$4.38	07/14/2010			A		6,000		07/14/201	2 0	7/13/2020	Common	6,000	\$4.38	6,000		D		
Option ⁽¹⁾	\$4.38	07/14/2010			A		6,000		07/14/201	3 0	7/13/2020	Common	6,000	\$4.38	6,000		D		
Option ⁽¹⁾	\$4.38	07/14/2010		I	A		6,000		07/14/201	$4 \mid 0$	7/13/2020	Common	6,000	\$4.38	6,000		D		

Explanation of Responses:

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

Robert H Spilman Jr

05/16/2011

** Signature of Reporting Person

Date

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

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.

^{*} 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).