FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
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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*     BELK JOHN R			2. Date of Event Requiring Staten (Month/Day/Year 07/13/2016	nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol  BASSETT FURNITURE INDUSTRIES INC [ BSET ]							
(Last) (First) (Middle) 2801 WEST TYVOLA ROAD		` ′ ′			Relationship of Reporting Pers (Check all applicable)     X Director     Officer (give title		10% Owner Other (specify		If Amendment, Date of Original Filed (Month/Day/Year)      Individual or Joint/Group Filing (Check Applicable Line)			
(Street) CHARLOTT (City)	CHARLOTTE NC 28217-4500					below)	below)			X Form filed by One Reporting Person Form filed by More than One Reporting Person		
		,	Гable I - Non	ı-Derivat	ive Se	curities Beneficiall	y Owned		,			
1. Title of Security (Instr. 4)				2	2. Amou	nt of Securities			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
					Benefici	ally Owned (Instr. 4)	Form: Direct or Indirect					
Common					Benefici		Form: Direct or Indirect					
Common		(e.		Derivative	e Seci	ally Owned (Instr. 4)	Form: Direct or Indirect (Instr. 5)	(1)`´				
	ative Security (Ir	•		Derivative Is, warra	e Secu	ally Owned (Instr. 4)  15,000  urities Beneficially (	Form: Direct or Indirect (Instr. 5)  D  Owned securities	(1)`´	rsion rcise		6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

John R Belk

07/21/2016

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).