## FORM 5

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPR	ROVAL
OMB Number:	3235-0362
Estimated average b	urden
hours per response:	1.0

Form	3 Holdings Rep	orted.			• • • • • • • • • • • • • • • • • • • •								hou	ırs per r	esponse:	1.0	
X Form	4 Transactions	Reported.	File	d pursuant to Sec or Section 30													
Name and Address of Reporting Person*     Smith Anne J			2. Issuer Name and Ticker or Trading Symbol HOOKER FURNISHINGS Corp [ HOFT ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  V Officer (give title Other (specify								
(Last) POB 47	(Fi	rst) (	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 01/30/2022 X Officer (give title Other (speciment) below) below) Chief Administration Officer									()				
(Street) MARTINSVILLE VA 24115				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate) (	Zip)									Pers	UII				
			I - Non-Deriv			uire		<u> </u>						1.			
1. Title of Security (Instr. 3)		3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. )						r Disposed	Securities Beneficially		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial	
							Amount	:	(A) o (D)	or Pi	rice	Issuer's	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)			Ownership (Instr. 4)	
Commor	Stock		12/30/2019		P4		52	(1)	Α	,	\$25.6818	8 10	,337		D		
Commor	Stock		03/31/2020		P4		88	(1)	A	;	<b>\$15.264</b> 9	9 10	,425		D		
Commor	Stock		06/30/2020		P4		70	(1)	A		<b>\$19.411</b> 3	3 10	,495		D		
Commor	Stock		09/30/2020		P4	r	<b>70</b> (1	.)(2)	A		\$25.8875	875 10,565		D			
Commor	Stock		12/31/2020		P4	r	64(1	.)(2)	A		\$32.0903	0903 10,629		29 D			
Commor	Stock		03/31/2021		P4	,	51	(1)	A		\$36.485	5 10,680		580 D			
Commor	Stock		06/30/2021		P4	,	55	(1)	A		<b>\$33.981</b>	1 10	10,735		D		
Commor	Stock		09/30/2021		P		70	(1)	A		\$27.5295	7.5295 10,805		05 D			
Commor	Stock		12/31/2021		P		94	(1)	A		\$23.1007	7 10	,899		D		
		Та	ble II - Derivat e.g., p	ive Securitie uts, calls, wa									d				
Derivative Conversion		Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Transaction Code (Instr. 8)					ite	and 7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	derivativ Securitie Benefici Owned Followin Reported	ecurities eneficially wned ollowing eported ransaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh t (Instr. 4)		
									$\Box$		Amount	1					

## **Explanation of Responses:**

- 1. Acquired by dividends received on HOFT stock
- 2. The reporting person's purchase of Hooker Furnishings Corp.'s ("Hooker") common stock through a dividend reinvestment program and reported herein, was matchable under Section 16(b) of the Securities Exchange Act of 1934, to the extent of 134 shares, with the reporting person's sale of 1,200 shares of Hooker's common stock at a price of \$33 per share on January 11, 2021. The reporting person has paid to Hooker \$557.29, representing the full amount of the profit realized in connection with the short-swing transaction.

(D)

Date

Yumin Yang Attorney in Fact for Anne J. Smith

03/16/2022

Expiration

Title

\*\* Signature of Reporting Person 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.