FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL							
OMB Number:	3235-0104						
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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

1. Name and Address of Reporting Person* Sweet David G 2. Date of Event Requiring Statemen (Month/Day/Year) 03/01/2006			3. Issuer Name and Ticker or Trading Symbol HOOKER FURNITURE CORP [hift]								
(Last) (First) (Middle) HOOKER FURNITURE CORPORATION			Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)					
POB 4708			Officer (give title below)		Other (specify below)		Individual or Joint/Group Filing (Check Applicable Line)				
(Street) MARTINSVILLE VA 24115							X		y One Reporting Person y More than One erson		
(City) (State) (Zip)											
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			Amount of Securities and a sense of the sens		ct (D)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Common Stock				0	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exer Expiration D (Month/Day/		ate	3. Title and Amount of Secur Underlying Derivative Securi			4. Conve or Exe	rcise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	ı Title		Amount or Number of Shares	Deriva Securi	tive	Direct (D) or Indirect (I) (Instr. 5)			

Explanation of Responses:

/s/ Robert W. Sherwood attorney in fact for David G.

Sweet

** Signature of Reporting Person

03/01/2006

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 5 (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.