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CULP INC												
Form 4												
April 21, 201												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check the	is box		v v ac	, mington,	D.C. 20	547				January 31,		
if no long		EMENT O	F CHAN	GES IN	BENEF	ICIA	LOW	NERSHIP OF	Expires. 200			
subject to Section 1)			SECURITIES					Estimated average burden hours per response 0.5			
Form 4 o												
Form 5	Filed p	ursuant to	Section 1	6(a) of the	e Securit	ies E	Exchang	e Act of 1934,	·			
obligation may cont				•	•	· ·	•	1935 or Section	n			
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	40				
1(b).												
(Print or Type I	Responses)											
(I fint of Type I	(copolises)											
1. Name and A	Address of Reportin	ng Person [*]	2. Issuer	Name and Ticker or Trading			ng	5. Relationship of Reporting Person(s) to				
SAXON FRANKLIN N Symbol				-				Issuer				
			CULP I	PINC [CFI]				(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			(Chec	k all applicable	;)		
				th/Day/Year)			_X_ Director10% Owner					
1823 EASTCHESTER DRIVE 04/20/20				20/2015				XOfficer (give titleOther (specify below) below)				
									Executive Offic	er		
(Street)			4. If Ame	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				Ionth/Day/Year)				Applicable Line)				
								X Form filed by C				
HIGH POIN	NT, NC 27265							Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities Aca	uired, Disposed of	f. or Beneficial	lv Owned		
1.Title of	2. Transaction D	ate 24 Dee		3.			_	5. Amount of	6. Ownership	-		
Security	(Month/Day/Yea	ned 3. 4. Securities Acquired n Date, if Transaction(A) or Disposed of (D)					Securities	Form: Direct				
(Instr. 3)		any	Code (Instr. 3, 4 and 5)					Beneficially	(D) or	Beneficial		
		(Month/	Day/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
								Reported	(1130. 4)	(1130. 4)		
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	04/20/2015			S	8,183	D	\$	8,440	Ι	401(k)		
Stock	0 11 201 201 3			5	(1)	D	26.22	3,110	-	Plan		
Common								(5.022	D			
Stock								65,933	D			

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SAXON FRANKLIN N 1823 EASTCHESTER DRIVE HIGH POINT, NC 27265	Х		Chief Executive Officer					
Signatures								
/s/ Kenneth R. Bowling, Attorney-In-Fact								
<u>**</u> Signature of Reporting Person		Date	2					

Explanation of Responses:

- * 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).
- (1) Open market sale pursuant to a 10b5-1 trading plan adopted December 12, 2014, by Reporting Person in accordance with Rule 10b5-1 of the Securities Exchange Act, as amended.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.