Instruction 1(b)

T Form 2 Holdings Poported

## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0362								
Estimated average burden								
hours per response:	1.0							

٠٠٠٠١٥ ا	riolalitys Repo	inted.																
Form 4	Transactions F	Reported.	File	ed pursuant to or Section					ities Excha ompany Ac									
1. Name and Address of Reporting Person* SAXON FRANKLIN N				2. Issuer Name <b>and</b> Ticker or Trading Symbol  CULP INC CULP							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
SAXON FRANKLIN IV											X	Direc	tor		10%	Owner		
(Last) (First) (Middle) 1823 EASTCHESTER DRIVE				Statement for Issuer's Fiscal Year Ended (Month/Day/Year)						(Year)	X	Office below			Othe belo	er (specify w)		
				04/29/2018						Chief Executive Officer								
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)							
HIGH POINT NC 27265											X Form filed by One Reporting Person							
													Form filed by More than One Reporting				eporting	
(City)	(St	ate) (2	Zip)	Person														
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, or	Benefici	ially	Owne	ed				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2. Transaction Date (Month/Day/Year)			3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Secu Bend		ally	6. Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership		
				(Month/Day/	(Month/Day/Year)		8)			(A) or (D)	r Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		(Instr. 4)	
Common Stock			12/20/2017			G		3,	600	D	\$32.85		96,013			D		
Common Stock			03/01/2018			G		1	.00	D	\$28.4		95,913			D		
Common Stock													275			I	401(k) Plan	
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									wned					
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. Transaction Code (Instr. 8)	of	ired r osed : 3, 4	Expir (Mon	te Exercisable and ration Date th/Day/Year)  Expiration Cisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ıt r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	

**Explanation of Responses:** 

/s/ Kenneth R. Bowling, Attorney-In-Fact

06/12/2018

\*\* 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.