HOOD GLENDA E Form 3 April 22, 2019 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB 2025 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Addres Person <u>*</u> HOOD GLEN	1	rting	2. Date of Event Requir Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol DELTA APPAREL, INC [DLA]					
. , .	irst)	(Middle)	04/11/2019	4. Relationshi Person(s) to I	ip of Reporting ssuer	5. If Amendment, Date Original Filed(Month/Day/Year)				
322 SOUTH MA (Str GREENVILLE, 2	reet)			X Director	all applicable) r 10% (Other w) (specify belo	Owner	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)	Table I	- Non-Derivat	tive Securiti	es Be	neficially Owned			
1.Title of Security (Instr. 4)				nt of Securities ally Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1			
Common Stock			0		D	Â				
Reminder: Report on owned directly or inc	-	e line for eac	ch class of securities bene	eficially S	EC 1473 (7-02)				
Table	II - Deriv	ative Secur	ities Beneficially Owned	d (e.g., puts, calls,	warrants, opt	ions, c	onvertible securities)			

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security: Security Direct (D) or Indirect		

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

Reporting Owners

Person

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other HOOD GLENDA E ÂX Â Â Â **322 SOUTH MAIN STREET** GREENVILLE, SCÂ 29601 Signatures /s/ Justin M. 04/22/2019 Grow, POA **Signature of Reporting Date

Explanation of Responses:

* 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. 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.