FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* LANGONE KENNETH G						2. Issuer Name and Ticker or Trading Symbol UNIFI INC [UFI]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 375 PARK AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 05/02/2014									Λ		er (give title			(specify
STE 2205 (Street) NEW YORK NY 10152					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N						Execution D			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and				5)	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
								ı	Code	e V	Am	nount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
COMMON STOCK 05/02/2014						1		P		1	1,700	A	\$21.98	21.9857(1)		986,629		D		
COMMON STOCK																25	5,000		I	By Wife ⁽²⁾
COMMON STOCK																100,000			I	By Invemed Associates LLC ⁽³⁾
	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)	L. Title of 2. 3. Transaction Date Execution Date, (Month/Day/Year) if any				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title Amou Secur Under Deriva Secur and 4	nt of ities lying ative ity (Instr. :	Dei Sec (Ins	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Da Fx	ate vercisabl		Expiration Date	Title	or Number of Shares						

Explanation of Responses:

- 1. The Reporting Person executed a trade order through a broker-dealer which resulted in multiple same-day same-way open market purchases, with the prices ranging from \$21.78 to \$22.13/share. The Reporting Person has reported these purchases on an aggregate basis using the weighted average price for the transactions and will provide detailed breakouts upon request.
- 2. The Reporting Person disclaims beneficial ownership of the securities held by his wife and this report should not be deemed an admission that the Reporting Person is the beneficial owner of his wife's securities for purposes of Section 16, or for any other purposes.
- 3. The Reporting Person is the principal equity holder and President and CEO of Invemed Associates, LLC. Pursuant to Instruction (4)(b)(iv) of Form 4, the Reporting Person has elected to report as indirectly beneficially owned the entire number of securities beneficially owned by such entity. The Reporting Person disclaims beneficial ownership of any securities, and any proceeds thereof, that exceed his pecuniary interest therein and/or are not actually distributed to him.

/s/Kenneth G. Langone by Ben 05/02/2014 Sirmons, POA

** 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.