FORM 4

obligations may continue. See

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
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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*						2. Issuer Name and Ticker or Trading Symbol UNIFI INC [UFI]										plicable)		Person(s) to Issuer	
(Last)	(Fi	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/08/2017									Offic below	ficer (give title low)		Other (specify below)	
(Street) NEW CA	ANAAN CT		06840 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filed by One In Form filed by One In Person								ne Rep						
		Tabl	e I - N	on-Deriv	/ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed			
Date			2. Transac Date (Month/Da		Exec if an	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Securi Benefi Owned		ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common	Stock			02/08/2	2017				P		11,100	A	\$26.	64(1)	1,22	20 297 ⁽²⁾ I See			See footnote ⁽²⁾
Common	Stock ⁽³⁾														6,200 D				
		Та	ble II								osed of, convertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Executi if any			4. Transaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc tion Da h/Day/\		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Dei Sei (In:	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$26.26 to \$26.86, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price.
- 2. The reporting person is the founder, managing principal and a member of Impala Asset Management LLC and Impala Asset Advisors LLC, which are, respectively, investment manager and general partner to funds that hold these securities, and the reporting person is a limited partner in some of these funds. As such, the reporting person may be deemed to beneficially own these securities. The reporting person disclaims beneficial ownership of these securities, except to the extent of his pecuniary interest therein.
- 3. Represents a grant of restricted stock units from the issuer for services as a director of the issuer. The restricted stock units were fully vested on the date of grant and will be converted into an equivalent number of shares of common stock following the reporting person's termination of service as a director of the issuer.

Remarks:

/s/ Robert J. Bishop by Sean D. 02/10/2017 Goodman 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.