## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person \*

(Print or Type Responses)

Cortez Sam Pina

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

DELTA APPAREL, INC [DLA]

322 S. MAIN ST. (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 09/28/2012									Offic	eer (give title be	elow)	Other (specify be	elow)		
(Street) GREENVILLE, SC 29601				4. If Amendment, Date Original Filed(Month/Day/Year)									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	(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui									red, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Execution Date, if			(Instr. 8)		ction				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D)	Beneficial Ownership			
							Co	ode	V	Amou	int (A)		Price				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock, \$.0	1 Par Value	09/28/2012				1	A		1,500	0 A	\$	0 8	2,900			D		
			Table II -					cquir	this fo curre ed, Di	orm and ently value of the second sec	re not ro alid OM	equiro AB co Bene	ed to ntrol	respond I number Ily Owne	unless the	ation contained form displays		1474 (9-02)	
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y		e, if Transaction Code (Instr. 8)		о Б В В В В В В С С С С С С С С С С С С С	Number		and E	xpirati	e Exercisable xpiration Date h/Day/Year)		Amou Jnder Secur	nt of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial Ownership (Instr. 4)		
				(	Code	V (	(A)		Date Exerci		Expirat Date	tion T		or Number of Shares					
Repor	ting O	wners																	

### **Signatures**

Cortez Sam Pina 322 S. MAIN ST.

Reporting Owner Name / Address

GREENVILLE, SC 29601

/s/ Deborah H. Merrill POA	10/01/2012			
**Signature of Reporting Person		Date		

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Relationships

Other

Officer

10% Owner

Director

X

\*\* 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.