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

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

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)

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

STATON SR ROBERT E				DELTA APPAREL, INC [DLA]							(Check all applicable) X Director 10% Owner				
322 S. MAIN STREET (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/10/2014								cer (give title be		Other (specify b	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 PersonForm filed by More than One Reporting Person				
(City	/)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Year	(Instr. 8)		(A) or Disposed			of (D)	Benefic	cunt of Securities cially Owned Following ed Transaction(s) s and 4)			7. Nature of Indirect Beneficial Ownership	
					С	ode	V	Amou	nt (A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock, \$.0	1 Par Value	12/10/2014			A		1,875	5 A	\$ 0	7,125			D	
				Derivative Secur			curre red, D	ently va	llid OMB	contro	ol number	r.	form displays	a	
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Dat any (Month/Day/Y	e, if Transaction Code (ear) (Instr. 8)	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)			Amo Undo Secu	tle and bunt of erlying irities r. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code V	(A)	(D)	Date Exerc		Expiration Date	n Title	Amount or Number of Shares				
Repor	ting O	wners													

Signatures

Reporting Owner Name / Address

STATON SR ROBERT E 322 S. MAIN STREET

GREENVILLE, SC 29601

/s/Deborah H. Merrill	12/11/2014			
**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

Officer

Other

10% Owner

Director

Χ

** 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.