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

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

## 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

	e Responses													
1. Name and Address of Reporting Person* TAYLOR A ALEXANDER II			2. Issuer Name and Ticker or Trading Symbol DELTA APPAREL, INC [DLA]				5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director						
(Last) (First) (Middle) 2 LAURENS STREET, UNIT 4A			3. Date of Earliest Transaction (Month/Day/Year) 11/21/2019				-	Office	r (give title belo	ow)(	Other (specify be	elow)		
(Street) CHARLESTON, SC 29401			4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  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 Own				Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	*	(Instr. 8)	(1			f(D)	Beneficial Reported	nt of Securities ally Owned Following Transaction(s)		Ownership Form:	Beneficial
				(Month/Day/Year)	Code	VA	mount	(A) or (D)	Price	or Ind		or Indirect	Ownership (Instr. 4)	
Common	Stock		11/21/2019		A	2	,750	A S	0 3	13,950			D	
	Report on a s	separate line fo	r each class of secur	ities beneficially ov	vned direc	Person contair	s who	respond this form	n are	not requ		spond unles	ss	1474 (9-02)
	Report on a s	separate line fo	Table II - 1	ities beneficially ov  Derivative Securiti e.g., puts, calls, wa	es Acquir	Person contair the for ed, Disp	s who ned in m disp	respond this form plays a c	n are urren ficially	not requ tly valid	ired to res		ss	1474 (9-02)
Reminder: I		3. Transaction Date (Month/Day/	Table II - I  a 3A. Deemed Execution Da any	Derivative Securiti e.g., puts, calls, wa 4. te, if Transaction Code Year) (Instr. 8)	es Acquir errants, op	Person contain the form the form the form of the form the form of	s who ned in m disp osed of onvertib Exercis	respond this form plays a c , or Bener ble securi sable	ficially ties) 7. Tit Amor Unde Secur	not requitly valid  y Owned  tle and unt of erlying	OMB conf	spond unles	f 10. Ownersh Form of Derivativ Security Direct (I or Indire	11. Nat of Indir Benefic Owners (Instr. 4

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
TAYLOR A ALEXANDER II 2 LAURENS STREET UNIT 4A CHARLESTON, SC 29401	X					

# **Signatures**

/s/ Justin M. Grow, POA	11/22/2019
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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.

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.