**INTERFACE INC** Form 4

ine 05, 2001		
	Form	1

**OMB** FOrm 4 UNITED STATES SECURITIES AND EXCHANGE APPROVAL **COMMISSION** 

OMB Number: 3235-0287

Washington, DC 20549

Expires: December 31,

2001

[ ] longer subject

Check box if no STATEMENT OF CHANGES IN BENEFICIAL Estimated **OWNERSHIP** 

average burden hours per

to Section 16.

 $Form \ 4 \ or \ Form \ \ \textbf{Filed pursuant to Section 16(a) of the Securities Exchange Act} \ \ response. \ \ldots 0.5$ of 1934, Section 17(a) of the Public

5 obligations may continue. See instructions

Utility Holding Company Act of 1935 or Section 30(f) of the **Investment Company Act of 1940** 

1(b).

(Print or Type Responses)

Name and Address of Reporting Person*  Kennedy Christopher G.	2. Issuer Name and Ticke Symbol	er or Trading	6. Relationship of Reporting Person(s) to Issuer (Check all applicable) X		
(Last) (First) (Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity voluntary)	(IFSIA)  4. Statement for Month/Year	Director 10% Owner Officer (give Other (specify title below) below)		
2859 Paces Ferry Road Suite 2000		May 2001			

(Street)

30339 Atlanta Georgia

- 5. If Amendment, Date of Original (Month/Year)
- 7. Individual or Joint/Group Filing

(Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person	(City)	(State) (	(Zip)
Table I - Non-Derivative Securities Acquired, Dispose	ed of, or Beneficially C	Owned	
1. Title of Security (Instr. 3)			
2. Transaction Date (Month/Day/Year)			
3. Transaction Code (Instr. 8)			
4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			
5. Amount of Securities Beneficially Owned at End of (Instr. 3 and 4)	Month		
6. Owner-ship Form: Direct (D) or Indirect (I) (Instr. 4)			
7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Code			
V			
	Amount		
	(A) or (D)		
	Price		
Class A Common Stock			
	05/22/01		
	P		

A

\$6.60

27,195

D

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 Instructions 4(b)(v).

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 control number. (3-99)

FORM 4	Table II - Derivative Securities Acquired, Disposed of, or
(continued)	Beneficially Owned
	(e.g., puts, calls, warrants, options, convertible securities)

onversion kercise ice of erivative ecurity	3. Transaction Date (Month/ Day/ Year)	4. Transac Code (Instr. 8	of De Sec Ac (A) Dis of (In	rivative curities quired or posed		on Date	7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9.Number of Derivative Securities Beneficially Owned at End of Month (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)
		Code	V (A)	(D)	Date Exercisable	Expiration Date	Title	Amount			

				Number of Shares		
				_		

Explanation of Responses:

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a). /s/ Christopher G. Kennedy

6/01/01

Christopher G. Kennedy

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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<sup>\*\*</sup>Signature of Reporting Person