FORM 4

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

| OMB APP | ROVAL | | | | |
|-------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| stimated average burden | | | | | |
| ours per respon | se 0.5 | | | | |

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

| (Print or Ty | pe Response | es) | | | | | | | | | | | | |
|---|-----------------|----------------|---|--|--------------------|---------------|---|--|--------------------|--|--|--------------------------------------|---|---|
| 1. Name and Address of Reporting Person * NIE ZENON S | | | 2. Issuer Name and Ticker or Trading Symbol CROWN CRAFTS INC [CRWS] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) (First) (Middle) C/O THE CEO ADVISORY BOARD, 8490 SENTINAE CHASE DRIVE | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/12/2009 | | | | | Office | r (give title belo | w) | Other (specify | below) | | |
| (Street) ROSWELL, GA 30076 | | | 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) |) | (State) | (Zip) | Та | ble I - Noi | -Deri | vative S | ecurities | Acqu | ired, Disp | osed of, or l | Beneficially | Owned | |
| 1.Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, i any (Month/Day/Yea | Code (Instr. 8) | | 4. Securities Acqu (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of | Beneficia | eially Owned Following ed Transaction(s) | | Form: Direct (D) or Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | V | Amoun | (A) or (D) | Price | , | | | (I) (Instr. 4) | |
| Common | Stock (1) | | 08/12/2009 | | A | | 5,000 | A | \$ 0 | 67,626 | | | D | |
| indirectly. | | | | erivative Securit | | cont the f | ained ir orm dis | n this fo splays a of, or Be | rm a curr | re not req ently valid | uired to re d OMB cor | formation espond un ntrol numb | less | EC 1474 (9- 02) |
| 1. Title of | 2 | 3. Transaction | | 4. | 5. Numbe | | | | |) Γitle and | Q Price of | 9. Number | of 10. | 11. Natur |
| Derivative Security (Instr. 3) | Conversion Date | | Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) | te, if Transaction Code | on of ar | | and Expiration Date (Month/Day/Year) | | An Un Sec | nount of derlying curities str. 3 and | Derivative Security (Instr. 5) | | Owners Form o Derivat Securit Direct (or Indir | hip of Indired Beneficia Ownersh (Instr. 4) D) |
| | | | | Code V | (A) (D) | | rcisable | Expiratio Date | n Tit | Amount or Number of Shares | | | | |

Reporting Owners

| Powerfier Comment Valley | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| NIE ZENON S C/O THE CEO ADVISORY BOARD 8490 SENTINAE CHASE DRIVE ROSWELL, GA 30076 | X | | | | | |

Signatures

| Olivia Elliott on behalf of Zenon S. Nie | 08/12/2009 |
|--|------------|
| **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).
- (1) Restricted stock grant pursuant to Issuer's 2006 Omnibus Incentive Plan, vesting 2,500 shares on August 12, 2010 and 2,500 shares on August 12, 2011, pursuant to Issuer's Restricted Stock Grant Agreement Form 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 nu | mber. |
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