## FORM 4

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

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
nours per response								

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

(Finit of Ty	pe Response	S)															
1. Name and Address of Reporting Person * FREEMAN NANCI				2. Issuer Name and Ticker or Trading Symbol CROWN CRAFTS INC [CRWS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Other (specify below)  Pres & CEO/Infant Products Div						
(Last) (First) (Middle) 711 WEST WALNUT STREET					3. Date of Earliest Transaction (Month/Day/Year) 03/08/2018												
(Street)					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					
COMPTON, CA 90220																	
(City) (State) (Zip)						T	ab	le I - Non-	-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)		Date	ate		2A. Deemed Execution Date, if		Code		(A) or Disposed of		5. Amount of Securities Beneficially Owned Following			6. Ownership	7. Nature of Indirect		
		oay/Year)	any (Month/Day/Year)		(Instr. 8)		(D) (Instr. 3, 4 and 5)			Reported Transaction(s) (Instr. 3 and 4)				Beneficial Ownership			
								Code	V	Amoun	(A) or (D)	Price				(I) (Instr. 4)	(Instr. 4)
Common Stock		03/08/20	018				S		99	D	\$ 6.35	184,204			D		
Common	Common Stock												23,547			I	By spouse
1. Title of Derivative	2. Conversion	3. Transaction	1 3A.		<i>2.g.</i> , p	uts, calls, v	wai	es Acquire rrants, opt	cont the f d, Di tions,	ained in orm dis	n this for splays a of, or Be tible secucisable	orm a curr	re not req ently valid ally Owned	8. Price of	spond un	of 10.	EC 1474 (9- 02)
Security		(Month/Day/Y	Year) any			Code (Instr. 8)			(Month/Day			Un Sec	derlying curities str. 3 and	Security	Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Form o Derivat Securit Direct ( or Indir	Beneficial Ownership (Instr. 4)
						Code V	V	(A) (D)	Date Exe	e rcisable	Expiration Date	on Tit	Amount or Number of Shares				
Repor	ting O	wners															
					Relationships							1					
Reporting Owner Name / Address		Director	r 10% O	wner	Officer					Oth	er						
FREEMAN NANCI 711 WEST WALNUT STREET COMPTON, CA 90220					Pres & 0	CE	EO/Infant	Proc	ducts D								

## **Explanation of Responses:**

/s/ Olivia W. Elliott on behalf of Nanci Freeman

\*\*Signature of Reporting Person

**Signatures** 

- \* 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).

03/09/2018

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.