## FORM 4

Instruction 1(b).

# Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
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#### 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

	pe response	3)													
1. Name and Address of Reporting Person * FREEMAN NANCI				2. Issuer Name and Ticker or Trading Symbol CROWN CRAFTS INC [CRWS]						5.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) 711 WEST WALNUT STREET				3. Date of Earliest Transaction (Month/Day/Year) 08/12/2009							X Officer (give title below) Other (specify below)  Pres & CEO/Infant Products Div				
(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 Person Form filed by More than One Reporting Person				
COMPTO	ON, CA 902	220									Form filed by	More than One	Reporting Person		
(City	y)	(State)	(Zip)			Tabl	le I -	Non-Deriv	ative Securitie	s Acquire	d, Dispose	d of, or Ben	eficially Own	ed	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, r) any (Month/Day/Ye		ite, if Co		8) (	. Securities Acc A) or Disposed Instr. 3, 4 and 5	of (D) Ov Tra			ed (	Ownership of Form: Be	eneficial wnership	
									(-)	1					
Reminder:	Report on a s	separate line for each	ch class of securities	benefici	ally o	owned di	rectly								
								contai	is who respo ned in this for isplays a curr	rm are no	t required	d to respon	nd unless th		74 (9-02)
									osed of, or Ben onvertible secu		wned				
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Date or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Yea		3A. Deemed Execution Date, if ) any (Month/Day/Year)	if Transaction Code r) (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Security: Direct (D) or Indirect	Beneficia
								Date	Expiration	Title	Amount or Number				
				Code	v	(A)	(D)	Exercisab	le Date	Title	of Shares				

Reporting Owner Name / Address	Relationships						
Teporeing 6 wher I want / I war ess	Director 10% Owner Officer		Officer	Other			
FREEMAN NANCI 711 WEST WALNUT STREET COMPTON, CA 90220			Pres & CEO/Infant Products Div				

## **Signatures**

Olivia Elliott on behalf of Nanci Freeman	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) The option was granted pursuant to Issuer's 2006 Omnibus Incentive Plan and is exercisable as follows: (a) 12,500 shares on or after August 12, 2010; and (b) 12,500 shares on or after August 12, 2011.
- (2) Derivative securities represent the grant of a stock option for services as an officer of the Issuer.

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

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.