FORM 4	4
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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).

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

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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

(Fint of Type Responses)												
1. Name and Address of Reporting Person – Stensrud Patricia			2. Issuer Name <b>and</b> Ticker or Trading Symbol CROWN CRAFTS INC [CRWS]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X. Director 10% Owner			
P.O. BOX 1028 (First	st)		3. Date of Earliest 7 08/10/2011	Fransaction	n (Mo	onth/Day/	Year)		Officer (give title below) Other (specify below)			
(Stre GONZALES, LA 70707	(Street) GONZALES, LA 70707				nal Fi	led(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) (Sta	ite)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	ction	(A) or Disposed of (D)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock (1)		08/10/2011		А		5,000	A	\$ 0	5,000	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Numbe	r 6. Date Exer	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	1 of		and Expirati	ion Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	De	erivativ	e (Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	curities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Ac	equired			(Instr	: 3 and			Security:	(Instr. 4)
	Security				· ·	.) or			4)			0	Direct (D)	
						sposed						- <b>F</b>	or Indirect	
						(D)						Transaction(s)	< /	
					· ·	nstr. 3,						(Instr. 4)	(Instr. 4)	
					4,	and 5)								
										Amount				
							Date	Evaluation		or				
							Exercisable	Expiration Date	Title	Number				
							Excrementatione	Date		of				
				Code V	(A	A) (D)				Shares				

## **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Stensrud Patricia P.O. BOX 1028 GONZALES, LA 70707	Х							

# **Signatures**

Olivia Elliott on behalf of Patricia Stensrud 08/11/2011

\*\*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).
- Restricted stock grant pursuant to Issuer's 2006 Omnibus Incentive Plan and Restricted Stock Grant Agreement Form A, vesting (A) 2,500 shares on the earlier of (i) (1) August 10, 2012 and (ii) the date immediately preceding the date of the 2012 Annual Meeting of Stockholders, and (B) 2,500 shares on the earlier of (i) August 10, 2013 and (ii) the date immediately preceding the date of the 2013 Annual Meeting of Stockholders.

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.