# FORM 4

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

OMB APP	ROVAL				
DMB Number:	3235-0287				
Estimated 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

1. Name and Address of Reporting Person * CHESTNUT E RANDALL		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) D. BOX 1028			3. Date of Earliest Transaction (Month/Day/Year) 03/30/2015						X Officer (give title below) Other (specify below) President and CEO					
(Street) GONZALES, LA 70707-1028			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)		Table I - Non-Derivative Securities Acqu				Acqui	red, Disp	osed of, or l	Beneficially (	Owned		
1.Title of S (Instr. 3)	(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		f Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	dd 5. Amount of Securities Beneficially Owned Followin Reported Transaction(s) (Instr. 3 and 4)		Following (s)	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
						Code	V	Amount	(A) or (D)	Price				or Indirect I) Instr. 4)	(Instr. 4)
Common	Stock		03/30/2015			F(1)		32,197	D	\$ 7.81	763,976			)	
	Report on a	separate line f	or each class of secu	ırities bene	eficially o	owned dire	ctly or	r							
Reminder: indirectly.	Report on a	separate line f	Table II - I	Derivative (	Securitio	es Acquire	Personta conta the fo	ons who ained in orm dis sposed o	this fo plays a f, or Ber	rm ard curre	e not req ently valid	uired to re	formation espond unle atrol numbe	ss	C 1474 (9- 02)
indirectly.		•	Table II - I	Derivative	Securitic	es Acquire rrants, op	Perseconta conta the fo	ons who ained in orm dis sposed o convert	this fo plays a f, or Ber ible secu	orm are curre neficial prities)	e not req ently valid	uired to re d OMB cor	espond unle ntrol numbe	ess er.	02)
	2. Conversion	3. Transactio	Table II - I (and 3A. Deemed Execution Date	Derivative e.g., puts, of 4. ate, if Trans	Securitic calls, was a saction lee tr. 8)	es Acquire rrants, op 5. Number	Personna conta the fo	ons who ained in orm dis sposed o convert ate Exercise Expiration	this for plays a  f, or Bereible securisable on Date	neficial arities) 7. T Amo	e not req ently valid	uired to re d OMB cor	espond unle ntrol number	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	11. Nature ip of Indirec Beneficial Ownershi (Instr. 4)

#### **Reporting Owners**

Describer Occurs Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CHESTNUT E RANDALL P.O. BOX 1028 GONZALES, LA 70707-1028	X		President and CEO			

### **Signatures**

/s/ Olivia Elliott on behalf of E. Randall Chestnut	04/01/2015
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) This transaction represents the withholding of 32,197 shares of common stock to satisfy the tax withholding obligations incurred by the Reporting Person upon the vesting of 67,226 shares of common stock (or one-half of the restricted stock grant) originally awarded to the Reporting Person on April 30, 2014.

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.

