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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respons	e 0.5				

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) 08/10/2016					r (give title belo	ow)	Other (specify b	pelow)			
(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)				Table I - Non-Derivative Securities Acqu					Acqu	ired, Disposed of, or Beneficially Owned				
(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)			d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	Beneficial Ownership	
					Code	V	Amount	(A) or (D)	Price			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock (1)		08/10/2016		A		7,000	A	\$ 0	17,500			D	
Common	Stock									100,863			I	By spouse
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.  SEC 1474 (9- contained in this form are not required to respond unless the form displays a currently valid OMB control number.														
				Perivative Securitie 2.g., puts, calls, war	•		•	*		•				
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/	Year) Execution Da	te, if Transaction Code Year) (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	and l	Expiratio	n Date	Am Und Sec	Title and ount of derlying urities str. 3 and		9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivati Security Direct ( or Indire	ve Ownership v: (Instr. 4) D)
				Code V	(A) (D)	Date Exer		Expiratio Date	n Titl	Amount or e Number of Shares				
Repor	ting O	wners												
				Relationships										
Repor	ting Owner	Name / Addr	ess Dim d	10% Owner Occa-	Other									

## **Signatures**

ROSWELL, GA 30076

NIE ZENON S

/s/ Olivia Elliott on behalf of Zenon S. Nie	08/12/2016		
Signature of Reporting Person	Date		

# **Explanation of Responses:**

C/O THE CEO ADVISORY BOARD

8490 SENTINAE CHASE DRIVE

- \* 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).

10% Owner

Officer

Other

Director

X

Restricted stock grant pursuant to Issuer's 2014 Omnibus Equity Compensation Plan, vesting (A) 3,500 shares on the earlier of (i) August 10, 2017 and (ii) the date (1) immediately preceding the date of the 2017 Annual Meeting of Stockholders; and (B) 3,500 shares on the earlier of (i) August 10, 2018 and (ii) the date immediately preceding the date of the 2018 Annual Meeting of Stockholders.

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

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.