may continue. See

Instruction 1(b). (Print or Type Responses)

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

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

OMB APPROVAL						
OMB Number: 3235-0287						
Estimated average burden						
hours per response	0.5					

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

Name and Address of Reporting Person Guyer Stephen				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) 06/08/2017						_>	X Officer (give title below) Other (specify below) Senior VP Procurement				
(Street) COMPTON, CA 90220			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 Acqui					s Acquire	l, Disposed	l of, or Ben	eficially Owi	ned		
1.Title of So (Instr. 3)	ecurity	1	(Month/Day/Year)	2A. Deen Execution any (Month/I	n Da	te, if Co (In Year)		(A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B	Securities Acc A) or Disposed nstr. 3, 4 and 5 (A) or mount (D)	of (D) Ow Tra		ving Reporte]] (Ownership of Form: Of	eneficial wnership
Reminder: I	Renort on a s	senarate line for eac	h class of securities	heneficia	ılly c	wned dir	ectly	z or indirect	tly						
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 (9-02) contained 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															
1 700 0	2	a m	(6	e.g., puts,		s, warra	nts,	options, co	nvertible secu	rities)		lo n :	0.37 1	c 10	lar sy .
Instr. 3) Price of Derivative Security (Month/Day/Year) (Instr. 8) Security (A) or Dispo		of Derivation Securities Acquired (A) or Disposed	Expiration Date (Month/Day/Year) Expiration Date (Month/Day/Year) Und Secu (Inst or uposed of str. 3, 4,			Amount of Underlying Securities	nount of derlying curities (Instr. 5)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
				Code	V	(A)	(D)	Date Exercisabl	Expiration Date	Title	Amount or Number of Shares				
Non- Qualified Stock Option (Right to Buy)	\$ 7.75	06/08/2017		A		10,000		(1)	06/08/2027	Commo Stock	n 10,000	(2)	10,000	D	
Repor	ting O	wners													

Reporting Owner Name / Address	Relationships						
Teporting owner runner, runners	Director	10% Owner	Officer	Other			
Guyer Stephen			G : VVD D				
711 WEST WALNUT STREET COMPTON, CA 90220			Senior VP Procurement				

Signatures

/s/ Olivia Elliott on behalf of Stephen Guyer	06/12/2017
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 2014 Omnibus Equity Compensation Plan and is exercisable as follows: (a) 5,000 shares on or after June 8, 2018; and (b) 5,000 shares on or after June 8, 2019.
- (2) Derivative securities represent the grant of a stock option for services rendered as an officer of the Issuer.

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.