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CARRIAGE Form 4 December 18	Л	TATES SECU	RITIES AND EXCL	IANGE	COMMISSION		APPROVAL		
Check this box Check this box							urs per		
	ddress of Reporting P	Symbol	2. Issuer Name and Ticker or Trading Symbol CARRIAGE SERVICES INC [CSV]			 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) 			
(Me			f Earliest Transaction Day/Year) 2013	_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) CEO					
HOUGHON	(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									
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	Transaction(A) or Disp Code (D) (Instr. 8) (Instr. 3, 4 a	osed of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common Stock	12/16/2013		G 3,540 E	\$ 17.2	1,378,994	D			
Common Stock					3,518	Ι	Spouse		
Common Stock					70,000	I	daughter in same household		

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

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displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Addr	ess	Relationships						
	Director	10% Owner	Officer	Other				
PAYNE MELVIN C 3040 POST OAK BLVD SUITE 300 HOUSTON, TX 77056	Х		CEO					
Signatures								
/s/ Melvin C. Payne	12/16/2013							
<u>**</u> Signature of	Date							

Reporting Person

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).

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.