## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

1. Name and Address of Reporting Person\*

(Last)

**NEWCASTLE CAPITAL GROUP LLC** 

(Middle)

(First)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden response: 0.5

Explanation

11. Nature of Indirect Beneficial Ownership (Instr. 4)

U obligat	ions may contir tion 1(b).			File							rities Exchan		of 1934			ho	ours per	response:	0
1. Name and Address of Reporting Person*  NEWCASTLE PARTNERS L P  (Last) (First) (Middle)  200 CRESCENT COURT  STE 1400					2.   P] - 3.	2. Issuer Name and Ticker or Trading Symbol PIZZA INN INC /MO/ [ PZZI ]  3. Date of Earliest Transaction (Month/Day/Year) 04/14/2009									5. Relationship of Reporting Person(s) to Issue (Check all applicable)  X Director X 10% Own Officer (give title below)  See Explanation				% Owner ner (specify
(Street) DALLAS (City)			75201 (Zip)		4.	If Amei	ndme	ent, Date	of Origir	nal File	ed (Month/D	ay/Year)			ne) Forn	n filed by n filed by	One Re	ing (Chec eporting P nan One F	
		Tab	le I - No	on-Deriv	/ativ	e Sec	curit	ties Ac	quire	d, Di	sposed o	of, or E	Benef	icia	ally Owne	ed			
1. Title of Security (Instr. 3)  2. Transa Date			2. Transa Date (Month/Da		Exe f) if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed C			s Acquired (A) or Of (D) (Instr. 3, 4 ar			Beneficia Owned F	es ally Following	Form	nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	e V	Amount	(A) o	Pric	e	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)
Common Stock \$.01 par value per share			04/14/	2009	009			P		200	A	\$1	.07	3,381	1,513	(1)(2)(3)		See Explanati	
		Ta	able II -								osed of, convertib				y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deel Execution if any (Month/I	med	4. Trans	action (Instr.	5. Number of		6. Date Exerci Expiration Dat (Month/Day/Ye		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		8 D S (I	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ve es ally ig d tion(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Benefici Ownersl ct (Instr. 4)
					Code	v	(A)	) (D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er					
1		Reporting Person*	<u> P</u>																
(Last) 200 CRE STE 140	SCENT CO	(First)	(Mid	ddle)															
(Street)	S	TX	752	201															
(City)		(State)	(Zip	))		-													
ı		Reporting Person*		EMEN	T LI	2													
(Last) 200 CRE STE 140	SCENT CO	(First)	(Mid	ddle)															
(Street)	S	TX	752	201															
(City)		(State)	(Zip	))		- $ $													

200 CRESCENT COURT STE 1400								
(Street) DALLAS	TX	75201						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*  SCHWARZ MARK E								
(Last) 200 CRESCENT C STE 1400	(First) OURT	(Middle)						
(Street) DALLAS	TX	75201						
(City)	(State)	(Zip)						
Name and Address of Reporting Person*     Coleman Clinton J								
(Last) (First) (Middle) C/O NEWCASTLE CAPITAL MANAGEMENT, L.P. 200 CRESCENT COURT, SUITE 1400								
(Street) DALLAS	TX	75201						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*  HALLMARK FINANCIAL SERVICES INC								
(Last)	(First)	(Middle)						
777 MAIN STREE STE 1000	T							
(Street) FORT WORTH	TX	76102						
(City)	(State)	(Zip)						
1. Name and Address of Reporting Person*  AMERICAN HALLMARK INSURANCE Co  OF TEXAS								
(Last) 777 MAIN STREE	(First) T, SUITE 1000	(Middle)						
(Street) FORT WORTH	TX	76102						
(City)	(State)	(Zip)						

## ${\bf Explanation\ of\ Responses:}$

- 1. The Reporting Persons are members of a "group" for purposes of Section 13(d)(3) of the Securities Exchange Act of 1934, as amended and accordingly may be deemed to beneficially own Shares of the Issuer's Common Stock owned in the aggregate by the other members of the Section 13(d) group. The Section 13(d) group consists of Newcastle Partners, L.P. ("NP"), Newcastle Capital Management, L.P. ("NCM"), Newcastle Capital Group, L.L.C. ("NCG"), Hallmark Financial Services, Inc. ("Hallmark"), American Hallmark Insurance Company of Texas ("AHIC"), Mark E. Schwarz ("Schwarz") and Clinton J. Coleman ("Coleman"). Each Reporting Person disclaims beneficial ownership of the shares of the Issuer's Common Stock owned by the other members of the Section 13(d) group except to the extent of its pecuniary interest therein.
- 2. NCM is the general partner of each of NP. NCG is the general partner of NCM, and Schwarz is the managing member of NCG. Accordingly, each of NCM, NCG and Schwarz may be deemed to beneficially own the shares directly owned by NP. In addition, NCM may be deemed to beneficially own a controlling interest in Hallmark, and Hallmark is the parent company of AHIC. Accordingly, each of NCM, NCG, Schwarz and Hallmark may be deemed to beneficially own the shares directly owned by AHIC.
- 3. Includes, as of 4/14/2009, (1) 2,884,494 shares of Common Stock held by NP, (2)(a) 55,843 shares of Common Stock and (b) 30,000 options exercisable into shares of Common Stock, held in each case by Schwarz directly, (3) 35,753 shares of Common Stock held by Coleman and (4) 375,423 shares of Common Stock held by AHIC. In the aggregate, as of 4/14/2009, the members of the Section 13(d) group beneficially own 3,381,513 shares of the Issuer's Common Stock.

partner, By: /s/ Mark E. Schwarz, its managing member

Newcastle Capital Management, L.P., By:

Newcastle Capital Group, 04/17/2009

L.L.C. its general partner, By: /s/ Mark E. Schwarz, its managing member

Newcastle Capital Group,

L.L.C., By: /s/ Mark E. 04/17/2009

Schwarz, its managing member

/s/ Mark E. Schwarz 04/17/2009 /s/ Clinton J. Coleman 04/17/2009

Hallmark Financial Services,

04/17/2009

American Hallmark Insurance

04/17/2009

\*\* Signature of Reporting Person

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

- \* 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.

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 Number.