FORM 4

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

BENEFICIAL OWNERSHIP

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

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

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* SCHWARZ MARK E					2. Issuer Name and Ticker or Trading Symbol PIZZA INN INC /MO/ [PZZI]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
										,			2	Directo	r		10% Ov	vner	
					3. Date of Earliest Transaction (Month/Day/Year) 06/29/2009									Officer (give title Other (spelow) below)				specify	
STE 1400				4. 1	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)		led by One	Repo	rting Perso	n
DALLAS	S T	X 	75201			Form filed by More than One Repo									One Repo	rting			
(City)	(S	tate)	(Zip)																
		Tab	le I - Nor	ı-Deriv	ative	e Se	curities	Acc	quired, I	Disp	osed o	f, or E	ene	ficially	/ Owned				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ear) i	2A. Deemed Execution Date, if any (Month/Day/Yea		3. Transac Code (II		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amour Securitie Beneficia Owned F	s ally ollowing	Form (D) or	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount (A)		or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
	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)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (I 3)	saction of Deriva Securi (A) or Disposo of (D) 3, 4 an		ve es d ed nstr.	5. Date Exercisabl Expiration Date Month/Day/Year)			of Securities		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership t (Instr. 4)
				C	Code	v	(A)		Date Exercisabl		xpiration ate	Title	or Nu of	ımber					
Director Stock	\$1.9	06/29/2009			A		40,000		06/29/2010		6/29/2019	Commo		0,000	\$1.9	40,000		D ⁽¹⁾⁽²⁾	

Explanation of Responses:

1. Options granted to Reporting Person. The Reporting Person is also a member 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 Group consists of Newcastle Partners, L.P. ("NP"), Newcastle Capital Management, L.P. ("NCM"), Newcastle Capital Group, L.L.C. ("NCG"), Mark E. Schwarz, Clinton J. Coleman, Hallmark Financial Services, Inc. and American Hallmark Insurance Company of Texas. The 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 Reporting Person is the managing member of NCG. Accordingly, the Reporting Person may be deemed to beneficially own the shares directly owned by NP.

/s/ Mark E. Schwarz

07/13/2009

** Signature of Reporting Person

Date

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.