FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

vvasinigton,	D.C. 20040	

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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*     Haigler Cliff					2. Issuer Name and Ticker or Trading Symbol  CARRIAGE SERVICES INC [ CSV ]								ck all application	applicable) rector		Person(s) to Issuer  10% Owner  Other (specify	
(Last) 1901 POS	ast) (First) (Middle) 901 POST OAK BLVD., APT 2108					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2012								Officer (give title below)  Director Finance		below)	
(Street) HOUSTO	N TX		7056 Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	dividual or Joint/Group Filing (Check Applicable )  K Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	e I - Non-l	Derivativ	/e Se	curities	Acc	quired, D	isp	osed of	, or Ben	eficially	/ Owned				
[		. Transactio Date Month/Day/Y	th/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)				Securities Acquired (A) of isposed Of (D) (Instr. 3, 4 a		5. Amour Securitie Beneficia Owned F Reported	s Illy ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V		Amount	(A) or (D)	Price	Transacti	Transaction(s) (Instr. 3 and 4)			(50.4)
Common Stock 11/0				11/01/20	/2012		A		12,000	2,000 A \$		12,000			D		
		Т	able II - De (e					ired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, Tran	saction e (Instr.	ı of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	e V	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares					
Performance Award <sup>(1)</sup>	\$11.5 <sup>(2)</sup>	11/01/2012		A		25,000		(1)		11/01/2017	Common Stock	25,000	\$0.00	25,00	0	D	

## **Explanation of Responses:**

1. Represents performance-based stock awards granted under the Carriage Services, Inc. Second Amended and Restated 2006 Long-Term Incentive Plan. The award will vest (if at all) on or before November 1, 2017 on the date on which the closing price of Carriage's Common Stock is greater than or equal to \$21.50 for the third time, whether or not consecutive, within a period of 30 consecutive calendar days. If these conditions are satisfied on or prior to the first anniversary of the grant date, which is November 1, 2013, then the vesting date of these awards will be November 1, 2013; provided that the Reporting Person has remained continuously employed by Carriage through such date.

2. The award represents the right of the Reporting Person to receive shares of Carriage Common Stock in exchange for payment of a purchase price equal to \$11.50 per share.

## Remarks:

/s/ Cliff Haigler 11/05/2012

\*\* 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.