FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL						
	OMB Number: 3235-02 Estimated average burden							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	d Address of		2. Issuer Name and Ticker or Trading Symbol CARRIAGE SERVICES INC [CSV]										olicable)	g Person(s) to 10%	ssuer Owner				
(Last) 1130 ME		3. Date of Earliest Transaction (Month/Day/Year) 11/15/2012									Offic belov	er (give title w)		Other (specify below)					
(Street) PRESTO PA 15142 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Forn Forn	dual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution Date			3. Transa Code (8)		4. Securiti Disposed			Securi Benefi Owne	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A) (D)	or Pi	ice		ted action(s) 3 and 4)		(Instr. 4)				
Common	Stock	/2012	2012			P		2,500	A	\$	10.762	37,375		D					
Common Stock															17,306		I	David J. DeCarlo Trust IMA	
		Та									sed of, onvertib				wned				
1. Title of Derivative Security (Instr. 3)	re Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E Expiration (Month/I	on Dat			Deri Sec (Ins	vative urity ir. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)			Expiration Date	Title	Amou or Numb of Share	er							

Explanation of Responses:

Remarks:

/s/ David J. DeCarlo 11/15/2012

** 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.