

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

|                                                 |           |
|-------------------------------------------------|-----------|
| OMB Number:                                     | 3235-0104 |
| Estimated average burden<br>hours per response: | 0.5       |

|                                           |                                                          |                                                                                                                                                    |                                                                                                                           |
|-------------------------------------------|----------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|
| 1. Name and Address of Reporting Person * | 2. Date of Event Requiring<br>Statement (Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol                                                                                                        |                                                                                                                           |
| <u>Jobe Madison</u>                       | <u>02/10/2009</u>                                        | <u>PIZZA INN INC /MO/ [ PZZI ]</u>                                                                                                                 |                                                                                                                           |
| (Last) (First) (Middle)                   |                                                          | 4. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)                                                                         | 5. If Amendment, Date of Original Filed<br>(Month/Day/Year)                                                               |
| <u>3551 PLANO PARKWAY</u>                 |                                                          | Director 10% Owner<br><input checked="" type="checkbox"/> Officer (give title below) Other (specify below)<br><u>Vice President of Development</u> |                                                                                                                           |
| (Street)                                  |                                                          |                                                                                                                                                    | 6. Individual or Joint/Group Filing (Check<br>Applicable Line)                                                            |
| <u>THE COLONY TX</u> <u>75056</u>         |                                                          |                                                                                                                                                    | <input checked="" type="checkbox"/> Form filed by One Reporting Person<br>Form filed by More than One Reporting<br>Person |
| (City) (State) (Zip)                      |                                                          |                                                                                                                                                    |                                                                                                                           |

Table I - Non-Derivative Securities Beneficially Owned

|                                 |                                                          |                                                                |                                                          |
|---------------------------------|----------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------|
| 1. Title of Security (Instr. 4) | 2. Amount of Securities<br>Beneficially Owned (Instr. 4) | 3. Ownership<br>Form: Direct (D) or<br>Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr.<br>5) |
|---------------------------------|----------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------|

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

|                                            |                                                                |                                                                                |                                                                    |                                                                      |                                                             |
|--------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------|
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying<br>Derivative Security (Instr. 4) | 4. Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 5. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 5) | 6. Nature of Indirect<br>Beneficial Ownership<br>(Instr. 5) |
|                                            | Date<br>Exercisable                                            | Expiration<br>Date                                                             | Title                                                              | Amount<br>or<br>Number<br>of Shares                                  |                                                             |

Explanation of Responses:

Remarks:

No securities are beneficially owned.

Steven D. Davidson as Attorney-  
In-Fact for Madison Jobe 02/13/2009

\*\* 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 5 (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.