FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of GIER RANDA			2. Issuer Name and Ticker or Trading Symbol PIZZA INN HOLDINGS, INC /MO/ [PZZI]		ionship of Reporting all applicable) Director Officer (give title	10% Owner Other (specify						
(Last) 3551 PLANO PAR	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 11/14/2012		Preside	below) ent & CEO						
(Street) THE COLONY	TX	75056	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	Form filed by One	Filing (Check Applicable Line) Reporting Person e than One Reporting Person						
(City)	(State)	(Zip)										

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8) 4. Securities Ad Of (D) (Instr. 3,) or Disposed	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)
Common Stock	11/14/2012		P		4,100	A	\$2.8659(1)	8,700	D	
Common Stock	11/15/2012		P		1,000	A	\$2.89	9,700	D	

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 Date, if any (Month/Day/Year)	Code (In	ransaction Derivative Securities		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	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$2.56							(2)	11/08/2022	Common Stock	230,000		230,000	D	
Employee Stock Option (right to buy)	\$2.56 ⁽³⁾	11/14/2012		A		16,400		(3)	11/08/2022	Common Stock	16,400	\$0 ⁽³⁾	34,800	D	
Employee Stock Option (right to buy)	\$2.56 ⁽³⁾	11/15/2012		A		4,000		(3)	11/08/2022	Common Stock	4,000	\$0 ⁽³⁾	38,800	D	

Explanation of Responses:

- 1. Represents the weighted average purchase price of transactions effected at prices ranging from \$2.78 per share to \$2.97 per share. Upon written request by the SEC, the Issuer or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- 2. Represents employee stock options exercisable as to 23,000, 46,000, 69,000 and 92,000 shares on November 8, 2013, 2014, 2015 and 2016, respectively.
- 3. Represents employee stock options conditionally granted as of November 8, 2012, and exercisable as to 10%, 20%, 30% and 40% of shares on November 8, 2013, 2014, 2015 and 2016, respectively.

Remarks:

Steven D. Davidson as Attorney-In-Fact for Randall E. Gier

11/16/2012

** 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.