#### JOHNSON NORMAN E

Form 3

August 17, 2012

# FORM 3

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and A Person * JOHNSO			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol CRACKER BARREL OLD COUNTRY STORE, INC [CBRL]					
(Last)	(First)	(Middle)	08/13/2012	4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  _X_ Director 10% Owner Officer Other			_X_ Form filed by One Reporting		
305 HARTI	(Street)	RIVE							
LEBANON	, TN 3′	7087		(give title below) (specify below)		ow)	Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - N	Non-Derivative Securities Beneficially Owned					
1.Title of Secu (Instr. 4)	ırity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	•		
Common St	tock		0		D	Â			
Reminder: Repowned directly			ach class of securities benefic	cially S	EC 1473 (7-02	2)			
whea directly	Perso	ons who res	spond to the collection of tained in this form are not						

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

required to respond unless the form displays a

currently valid OMB control number.

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

Shares

(I) (Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

JOHNSON NORMAN E

305 HARTMANN DRIVE Â X Â Â

LEBANON, TNÂ 37087

### **Signatures**

Norman E. Johnson by Michael J. Zylstra, Attorney-in-fact

08/17/2012

\*\*Signature of Reporting Person

Date

### **Explanation of Responses:**

- \* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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