DHARIA ARVIND Form 4 May 01, 2018

# FORM 4

#### **OMB APPROVAL**

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

**OMB** 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

0.5

Form 4 or Form 5 obligations may continue.

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

**SECURITIES** 

burden hours per response...

See Instruction

1(b).

(Print or Type Responses)

DHARIA ARVIND			2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) t Issuer			
			STEVEN MADDEN, LTD. [SHOO]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				
			(Month/Day/Year)		10% Owner		
C/O STEVEN	N MADDE	N	05/01/2018	_X_ Officer (give title			
LTD, 52-16 H	BARNETT	AVENUE		below) be Chief Financi	low) al Officer		
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line)			

LONG ISL	AND CITY, I	NY 11104	_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table I - No	n-Derivative Securities Acq	uired, Disposed (	of, or Beneficial	ly Owned	
1.Title of	2. Transaction	Date 2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature	

1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	on(A) or Disposed of	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	(D)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership
					Following	(Instr. 4)	(Instr. 4)
				(	Reported		
				(A)	Transaction(s)		
				or	(Instr. 3 and 4)		

Amount (D) Price

Common Stock, par

12,500 05/01/2018 \$0 79,162 D value (1)

\$0.0001 per share

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

### Edgar Filing: DHARIA ARVIND - Form 4

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transacti	5. orNumber	6. Date Exerc Expiration D		7. Title Amount		8. Price of Derivative	9. Nu Deriv
Security or Exerci (Instr. 3) Price of Derivativ Security		(Month/Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of	(Month/Day/Year)		Underlying Securities (Instr. 3 and 4)	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title N	Amount or Number of Shares		

# **Reporting Owners**

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

DHARIA ARVIND C/O STEVEN MADDEN LTD 52-16 BARNETT AVENUE LONG ISLAND CITY, NY 11104

Chief Financial Officer

### **Signatures**

/s/ Arvind 05/01/2018 Dharia

\*\*Signature of Date Reporting Person

### **Explanation of Responses:**

- 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).

Reflects restricted stock grant made to the reporting person on May 01, 2018 under the Steven Madden, Ltd. 2006 Stock Incentive Plan (1) (the "Plan"), which stock will vest in three (3) annual installments as follows: 4,167 shares on December 15, 2018; 4,167 shares on December 15, 2019; and 4,166 shares on December 15, 2020, subject to forfeiture pursuant to the terms of the Plan.

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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