Edgar Filing: SIEGEL DANIEL - Form 4

Form 4 March 19, 20											
FORM	14									APPROVAL	
	• • UNITED S	STATES					NGE	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 1 Form 4 o Form 5	6. r Filed purs	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								Expires:January 31, 2005Estimated average burden hours per response0.5	
obligation may cont <i>See</i> Instru 1(b). (Print or Type F	inue. Section 17(a			ility Hold vestment	•	· ·		of 1935 or Section 40	on		
1. Name and Address of Reporting Person <u>*</u> SIEGEL DANIEL			2. Issuer Name and Ticker or Trading Symbol LIFETIME BRANDS, INC [LCUT]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (N	liddle)	3. Date of	Earliest Tr	ansaction	-	-	(Che	ck all applicab	le)	
	IME BRANDS, STEWART AVE		(Month/D 03/15/20	-				Director X Officer (giv below)		% Owner her (specify	
	(Street)			ndment, Da .th/Day/Year	-	ıl		6. Individual or J Applicable Line) _X_ Form filed by	One Reporting I	Person	
GARDEN C	CITY, NY 11530							Person	More than One F	Reporting	
(City)	(State) (Zip)	Tabl	e I - Non-D) erivative	Securi	ities Ac	quired, Disposed o	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8) Code V	on(A) or D (D) (Instr. 3,	(A) (A) or (D)	1 of 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/15/2019			А	14,000 (1)	А	\$0	357,052	D		
Common Stock								1,500	Ι	Spouse	
Common Stock								1,500	I	Custodian	
Common Stock								1,500	I	Custodian (3)	
Common Stock								6,000	Ι	Trustee (4)	

Edgar Filing: SIEGEL DANIEL - Form 4

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.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	re		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date	Expiration	T:41-	or Number		
						Exercisable	Date	Title	Number		
				Cada J	$I(\mathbf{A})$ (D)				of		
				Code V	7 (A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
hepotolig o whet that of that ess	Director	10% Owner	Officer	Other			
SIEGEL DANIEL C/O LIFETIME BRANDS, INC. 1000 STEWART AVENUE GARDEN CITY, NY 11530			President				
Signatures							
/s/ Sara Shindel Attorney-in-fact for	or Daniel		03/19/2019				

Siegel

**Signature of Reporting Person

Date

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).
- (1) The restricted stock was granted pursuant to the Company's Amended and Restated 2000 Long-Term Incentive Plan.
- (2) Uniform Transfer to Minors Act Custodian for Child 1.
- (3) Uniform Transfer to Minors Act Custodian for Child 2.
- (4) Reporting person is trustee for a trust for the benefit of Katherine & Juliana Wells.

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.