Edgar Filing: MIGLIORINI PETER - Form 4

MIGLIORIN	NI PETER											
Form 4												
June 03, 200)9											
FORM	ΛΔ								OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check th									Expires:	January 31,		
subject t	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							•	2005			
Section				SECUR	RITIES				Estimated average burden hours per			
	Form 4 or								response	0.5		
Form 5	· · · · ·						•	e Act of 1934,				
obligatio may con	Section 1							1935 or Section	1			
See Instr		30(h)) of the In	vestment	Compar	ıy Ас	t of 194	0				
1(b).												
(Print or Type	Responses)											
(I TING OF TYPE	Responses)											
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading					nσ	5. Relationship of Reporting Person(s) to						
MIGLIORINI PETER Symbol				i i vuille ull e	i Tieker of	IIuui	115	Issuer				
			•	N MADI	DEN. LT	D. IS	HOO1					
(Last)				f Earliest Ti			,	(Check all applicable)				
(Lust)	(1130)	(ivitable)	(Month/I		ansaction			X Director	10%	Owner		
C/O STEVEN MADDEN, 06/01/2			-				Officer (give title Other (specify					
	6 BARNETT A	VENUE	00,01,2	007				below)	below)			
	(Street)		4. If Ame	endment, Da	ate Origina	đ		6. Individual or Joi	int/Group Filin	g(Check		
				nth/Day/Year	U			Applicable Line)				
					,			_X_ Form filed by O				
LONG ISL	AND CITY, NY	<i>č</i> 11104						Form filed by M Person	ore than One Rej	porting		
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Da	ate 2A. Deer	med	3.	4. Securi	ties Ac	cquired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year	r) Executio	on Date, if Transaction(A) or Disposed of (D)				d of (D)	Securities	Ownership	Indirect		
(Instr. 3)		any		Code (Instr. 3, 4 and 5) $(1 + 1)$				Beneficially	Form: Direct Benefic			
		(Month/I	Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
								Reported	(Instr. 4)	(IIIsu: +)		
						(A) or		Transaction(s)	. ,			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	06/01/2009			S	1,500	D	\$ 29.185	0	D			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: MIGLIORINI PETER - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

C/O STEVEN MADDEN, LTD.

52-16 BARNETT AVENUE LONG ISLAND CITY, NY 11104

MIGLIORINI PETER

Signatures

/s/ ARVIND DHARIA, Attorney-in-Fact for PETER MIGLIORINI

**Signature of 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).

Relationships

10% Owner Officer Other

Director

Х

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.

06/03/2009 Date