SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** SECURITIES

OMB APPROVAL

3235-OMB Number: 0104

Estimated average burden hours per response: 0.5

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 Reporting Person <sup>*</sup> <u>Kumar Maria Teresa</u>	2. Date of E Requiring S (Month/Day 01/04/202	Statement //Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>STEVEN MADDEN, LTD.</u> [ SHOO ]							
(Last) (First) (Middle) C/O STEVEN MADDEN LTD				4. Relationship of Reporting Person(s) to Issuer (Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
52-16 BARNETT AVENUE			X	Director	10% Owner Other (specify	-	6. Individual or Joint/Group Filing			
(Street) LONG ISLAND NY 11104 CITY				Officer (give title below)	below)		(Chi	Person	by One Reporting	
(City) (State) (Zip)										
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				nt of Securities ally Owned (Instr.			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)	Expiration D	. Date Exercisable and xpiration Date Month/Day/Year)		3. Title and Amount of Secu Underlying Derivative Secu (Instr. 4)				5. Ownership Form: Direct (D)	Ownership (Instr.	
	Date Exercisable	Expiration Date	Title		Amount or Number of Shares	mount Derivative Security		or Indirect (I) (Instr. 5)	U.	

**Explanation of Responses:** 

**Remarks:** 

Reporting Person was appointed to the Board of Directors of Steven Madden, Ltd., effective 01/04/2021. No securities are beneficially owned.

/s/ Maria Teresa Kumar

01/14/2021

\*\* 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 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.

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.