FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Washington, D.C. 20045

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL										
OMB Number:	3235-0287									
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hours per response:	0.5									

Instruc	tion 1(b).			File							ies Exchan mpany Act			34		liouis	per res	sporise.	0.5	
1. Name and Address of Reporting Person*  MIGLIORINI PETER					2. Issuer Name <b>and</b> Ticker or Trading Symbol STEVEN MADDEN, LTD. [ SHOO ]								(Che	eck all applic	tionship of Reporting Pe all applicable) Director Officer (give title below)		on(s) to Iss			
(Last) (First) (Middle) C/O STEVEN MADDEN, LTD.					3. Date of Earliest Transaction (Month/Day/Year) 05/27/2005													Other (specify below)		
(Street) LONG ISLAND NY CITY  11104					4. 1	f Ame	endment, [	Date o	of Original	Filed	(Month/Da	ay/Year)		Line	Y Form f	iled by One	e Repo	(Check Aporting Person One Repo	n	
(City)	(S	State)	(Zip)																	
		Tak	ole I - Nor	n-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed o	f, or E	3en	eficiall	y Owned	· .				
Date				insaction th/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Insti						5. Amou Securitie Beneficia Owned F	es ally Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	nount (A) or (D)		Price	Reported Transact (Instr. 3 a	on(s)			(Instr. 4)		
			Table II -								osed of, convertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date, T	ransaction code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	1	Amount or Number of Shares						
Stock Option (Right to	\$17.42	05/27/2005			A		10,000		(1)	(	05/27/2015	Comm Stock		10,000	\$0	50,000	0	D		

## **Explanation of Responses:**

1. The option vests in two equal installments at the first and second quarter following the period ended June 30, 2005.

## Remarks:

/s/ Peter Migliorini

07/07/2005

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.