| SEC | Form | 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

| 1. Name and Address of Reporting Person [*] <u>SINHA AWADHESH K</u> | , | 2. Issuer Name and Ticker or Trading Symbol <u>STEVEN MADDEN, LTD.</u> [SHOO] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner |
|---|----------------|--|---|
| (Last) (First) (C/O STEVEN MADDEN, LTD. 52-16 BARNETT AVENUE | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 01/02/2020 | X Officer (give title Other (specify below) below) Chief Operating Officer |
| | 11104 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | Disposed Of (D) (Instr. 3, 4 and 5) Securities Fo Beneficially Owned Following (I) Reported Transaction(s) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
|--|--|---|------------------------------|---|---|---------------|---|---|---|----------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) | | (1150.4) |
| Common Stock, par value \$0.0001 per share | 01/02/2020 | | Α | | 11,598 | Α | \$43.11 | 49,036 | D | |

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

| | | | | | | | | | · · · | | | | | | | | |
|---|---|--|---|------------------------------|---|---|---|---------------------|---|-------|---|--|--|--|--|--------------------|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secur Acqu (A) or Dispo of (D) (Instr | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date (Month/Day/Year) Amount of Securities Underlying Derivative Securities Underlying Derivative Securities (Instr. 5) Derivative Securities Beneficially Owned Following Reported Transaction(9 (Instr. 4) | | Expiration Date An (Month/Day/Year) Se Un De Se | | Expiration Date Amount of (Month/Day/Year) Securities Underlying Derivative Security (Instr. 3 | | Securities Beneficially Owned Following Reported Transaction(s) | Ownership Form: | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

/s/ Arvind Dharia, Attorney-in-01/06/2020

Fact for Awadhesh K. Sinha

** 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 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.