FORM 3

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

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

- 1									
	OMB APPROVAL								
	OMB Number:	3235-0104							
	Estimated average burden								
	hours per response	e: 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

Schwartz Thomas H (M			Date of Event equiring Staten Month/Day/Year 5/21/2004	nent	3. Issuer Name and Ticker or Trading Symbol STEVEN MADDEN, LTD. [ SHOO ]							
(Last) (First) (Middle) C/O STEVEN MADDEN, LTD. 52-16 BARNETT AVENUE		` ′			Relationship of Reporting Pers (Check all applicable)     X Director		10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) LONG ISLAND CITY (City)	NY (State)	11104 (Zip)	-			Officer (give title below)	Other (spe below)		6. Individual or Joint/Group Filing (Che Applicable Line)  X Form filed by One Reporting F Form filed by More than One Reporting Person		/ One Reporting Person / More than One	
(- 9)	()		abla I. Non	Dorivet	ivo C	ecurities Beneficiall	. Owned					
1. Title of Security (Instr. 4)				2	2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						10,600	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	3. Title and Amount of Secu Underlying Derivative Secur			4. Convers or Exerc	cise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	n Title	e	Amount or Number of Shares	Derivati Security	ve	or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

Remarks:

/s/ THOMAS H. SCHWARTZ 05/31/2006

\*\* 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 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.