FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-028									

37 Estimated average burden hours per response: 0.5

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Section	n 30(h)	of the I	nvestme	ent Co	mpany Act	of 1940							
1. Name and		Reporting Person*							ker or Tra	_	Symbol  O. SHOO	0]				olicable)	g Person(s) to I		
,														X		er (give title		(specify	
(Last) (First) (Middle)  C/O STEVEN MADDEN LTD					3. Date of Earliest Transaction (Month/Day/Year) 09/15/2014								Chief Financial Officer						
52-16 BARNETT AVENUE  4. If Amendment, Date of Original Filed (Month/Day/Year  (Street)								ay/Year)		6. Individual or Joint/Group Filing (Check Applicable Line)									
LONG ISI CITY	LAND N	<b>Y</b> 1	11104												Forn	Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(Si	tate) (	Zip)																
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	, Dis	sposed o	f, or B	enef	icially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) of (D) (Instr. 3, 4)			and 5) Secu Bene		rities   I ficially ed Following   (	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code	v	Amount	(A) o (D)	r Pri	се	Trans	action(s) 3 and 4)		(iiisti. 4)	
Common Stock, par value \$0.0001 per share ("Common Stock") 09/15/2				2014	014			S		21,025 D		\$3	3.61(1)	1	43,079	D			
Common Stock 09/16/2				2014				S		15,000	D	\$3	3.79(2)	128,079		D			
		Та									osed of, onvertib				wned				
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Exe (Month/Day/Year) if a				action of Deriv Secu Acqu (A) o Disp of (D		r osed ) :. 3, 4	6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		Deriv Secu (Inst	vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Numb of Shares								

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$33.50 to \$33.76, inclusive. The reporting person undertakes to provide to the Company, any security holder of the Company or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$33.75 to \$33.86, inclusive. The reporting person undertakes to provide to the Company, any security holder of the Company or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

/s/ Arvind Dharia 09/17/2014

\*\* 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.