Edgar Filing: STEIN MART INC - Form 4

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Form 4	I INC										
January 16, 2014 FORM 4 Image: Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). State State<							OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5				
(Print or Type Ro	esponses)										
COHEN IRWIN Symbol			Symbol	suer Name and Ticker or Trading ol IN MART INC [SMRT]				5. Relationship of Reporting Person(s) to Issuer			
(Month				Date of Earliest Transaction Ionth/Day/Year) /14/2014				(Check all applicable) Officer (give title below) below) (Check all applicable) 10% Owner Other (specify below)			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
EDEN PRAI	REI, MN 5534	44						Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executi any	emed on Date, if /Day/Year)	3. Transactic Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/14/2014			А	2,708 (1)	А	\$0	22,324	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e			le and int of lying ities 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director 10% Owner		Officer Other					
COHEN IRWIN BARBARA BUISMAN 11840 VALLEY VIEW ROAD EDEN PRAIREI, MN 55344	Х							
Signatures								
Greg Lohman, as Attorney-in-Fa Cohen	01/16/2014							
<u>**</u> Signature of Reporting Perso		Date						

Explanation of Responses:

- * 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).
- (1) Restricted shares granted pursuant to the Issuer's 2001 Omnibus Plan. The shares cliff vest 100% on the third anniversary of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.