Edgar Filing: STEIN MART INC - Form 4

| STEIN MAR | RT INC | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------|-------------------------------------------|----------------------------------------------|-------|--------------------|--------|----------------------------|---------------------------------------|------------------------|---------------------------|--|--|
| Form 4 | | | | | | | | | | | | | |
| August 27, 2 | 015 | | | | | | | | | | | | |
| FORM | 14 | | | | | | | | | OMB AI | PPROVAL | | |
| | UNIII | ED STATES | | | | ND EXC D.C. 205 | | NGE (| COMMISSION | OMB Number: | 3235-0287 | | |
| Check the | | | | | | | | | | Expires: | January 31, | | |
| subject to statement of changes of the statement of the s | | | | | | | CIA | LOW | NERSHIP OF | Estimated a | 2005 average | | |
| Section 1 | 6. | SECURITIES | | | | | | | | burden hours per | | | |
| Form 4 o Form 5 | | | 0 . 1 | | • .1 | а | F | 1 | | response | 0.5 | | |
| obligation | | - | | | | | | | ge Act of 1934, | | | | |
| may cont | inue. Section | | | • | | • | - · | | of 1935 or Section | n | | | |
| See Instru | uction | 50(II) | of the In | vesuite | | company | y Act | 01 19 | 40 | | | | |
| 1(b). | | | | | | | | | | | | | |
| (Print or Type F | Responses) | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 1. Name and A | ddress of Repor | ting Person [*] | 2. Issuer | Name a | and | Ticker or 7 | Гradin | g | 5. Relationship of | Reporting Person(s) to | | | |
| Kleffner Gro | egory W | | Symbol | | | | | | Issuer | | | | |
| | | | STEIN I | EIN MART INC [SMRT] | | | | | (Check all applicable) | | | | |
| (Last) | (First) | (Middle) | 3. Date of | Earlies | t Tra | insaction | | | (Cliec | k all applicable | 5) | | |
| | | | (Month/D | nth/Day/Year) | | | | | Director 10% Owner | | | | |
| C/O STEIN MART, INC., 1200 06/08/20 | | | | 08/2015 | | | | | X Officer (give below) | | tle Other (specify below) | | |
| RIVERPLA | CE BOULEV | ARD | | | | | | | · · · · · · · · · · · · · · · · · · · | Financial Offic | er | | |
| | (Street) | | 4. If Ame | ndment. | Dat | e Original | | | 6. Individual or Jo | oint/Group Filir | 1g(Check | | |
| | | | | Amendment, Date Original (Month/Day/Year) | | | | | Applicable Line) | | | | |
| | | | | | | | | | $_X$ Form filed by C | | | | |
| JACKSON | /ILLE, FL 32 | 207 | | | | | | | Person | Iore than One Re | eporting | | |
| (City) | (State) | (Zip) | | . | D | • • • | | | | | | | |
| (eng) | (State) | (Eip) | Tabl | e I - No | n-De | erivative S | securi | ties Ac | quired, Disposed of | f, or Beneficial | ly Owned | | |
| 1.Title of | | Date 2A. Dee | | | | | | | 5. Amount of | 6. Ownership | | | |
| Security (Instr. 3) | (Month/Day/Y | on Date, if TransactionAcquired (A) or Code Disposed of (D) | | | | | | Securities Beneficially | Form: Direct (D) or | Beneficial | | | |
| (Instr. 5) | | any (Month/ | (Day/Year) (Instr. 8) (Instr. 3, 4 and 5) | | | | | | Owned | | Ownership | | |
| | | | | | | | | | Following | (Instr. 4) | (Instr. 4) | | |
| | | | | | | | (A) | | Reported Transaction(s) | | | | |
| | | | | | | | or | р. | (Instr. 3 and 4) | | | | |
| Common | | | | Code | V | Amount | (D) | Price | | | | | |
| Stock | 06/08/2015 | | | G | V | 950 | D | \$0 | 192,596.424 | D | | | |
| Stock | | | | | | | | | | | | | |

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. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Tit Amou Undez Secur (Instr | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna 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 | | | | | |
| Kleffner Gregory W C/O STEIN MART, INC. 1200 RIVERPLACE BOULEVARI JACKSONVILLE, FL 32207 |) | | Chief Financial Officer | | | | | | |
| Signatures | | | | | | | | | |
| G. L. Lohman, attorney-in-fact | 08/26/2015 | ; | | | | | | | |
| <u>**</u> Signature of Reporting Person | 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).

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.