## Edgar Filing: STAGE STORES INC - Form 4

STAGE STO	DRES INC										
Form 4											
March 17, 20	016										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB AF	OMB APPROVAL	
	• • UNITED	) STATES					NGE C	OMMISSION	OMB	3235-0287	
Check th	is box		Wa	shington,	, D.C. 20	549			Number:		
if no long	ner				DENIER				Expires:	January 31, 2005	
subject to STATEMENT OF CHAN				IGES IN BENEFICIAL OWN				ERSHIP OF	Estimated average		
Section 1 Form 4 o	Section 16.				SECURITIES				burden hours per		
Form 5		ircuant to	Section 1	6(a) of th	o Soouri	tion E	Tychongo	Act of 1934,	response	0.5	
obligatio							•	1935 or Sectior	<b>,</b>		
may cont	tinue.	• •		vestment	U	-	•		1		
See Instruction 1(b).	uction	50(11)	of the fil	i vestinent	compar	Iy 7 IC		J			
1(0).											
(Print or Type I	Responses)										
STASYSZEN RICHARD E Symbo				2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
								155001			
			STAGE	E STORE	S INC [S	SIJ		(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	f Earliest Ti	ransaction						
2425 WEST LOOP SOUTH(Month/ 03/16/2				Ionth/Day/Year)				Director		Owner	
			03/16/2	016				XOfficer (give titleOther (specify below) below)			
								SVP, Fina	ance and Contro	oller	
			4. If Ame	mendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mo	nth/Day/Year	r)			Applicable Line)			
								_X_ Form filed by O Form filed by M			
HOUSTON	, TX 77027							Person		porting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secui	rities Acqu	ired, Disposed of	, or Beneficial	y Owned	
1.Title of	2. Transaction Da	te 2A. Deer		3.	4. Securit		_	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year	n Date, if	Transactio				Securities	Ownership	Indirect		
(Instr. 3)		any		Code	(Instr. 3,	4 and	5)	Beneficially	Form: Direct Benefic		
		(Month/I	Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)	
								Reported	(Instr. 4)	(11150.4)	
						(A)		Transaction(s)	()		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	02/16/0016						\$	24.450	D		
Stock	03/16/2016			А	84 <u>(1)</u>	А	8.0785	34,450	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Addres	s	Relationships							
	Director	10% Owner	Officer	Other					
STASYSZEN RICHARD E 2425 WEST LOOP SOUTH HOUSTON, TX 77027			SVP, Finance and Controller						
Signatures									
/s/ Richard E. Stasyszen	03/17/2016								
<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).

(1) These shares were acquired pursuant to the Stage Stores, Inc. Nonqualified Deferred Compensation Plan.

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.