FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OMB APPROVAL OMB Number: 3235-

| - 1 | | | | | | | | | |
|-----|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| | Estimated average burden | | | | | | | | |
| | hours per response: | 0.5 | | | | | | | |
| - 1 | | | | | | | | | |

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 Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* WESTERFIELD WILLIAM U | | | | | | 2. Issuer Name and Ticker or Trading Symbol LIFETIME BRANDS, INC [LCUT] | | | | | | | | | Check all a | | , | | | |
|---|--|-------------|--|---------|----------------|--|---|------|------------------|--|--------------------|-------|---|---|---|--|----------------------|--|--|--|
| | ETIME BI | RANDS, INC. | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/19/2013 | | | | | | | | | | icer (give title ow) | e Other (s below) | | | |
| 1000 STEWART AVENUE | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) GARDEN CITY NY 11530 | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (: | State) (| Zip) | | | | | | | | | | | | | | | | | |
| | | Tab | le I - Noi | n-Deriv | ative | Se | curitie | s Ac | quired, | Dis | posed o | f, or | Bene | efici | ally Owi | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date, | | | Code | Transaction Disposed Code (Instr. 5) | | | | | nd Secu Bend Own | nount of irities eficially ed Following | Form: | nership Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | | A) or D) | Price | ͺ Tran | orted saction(s) r. 3 and 4) | | | (Instr. 4) | |
| Common Stock 09/19/2 | | | | | 9/2013 | 2013 | | S | | 150 | \Box | D | \$1 | 5.5 | 12,315 | | I | Trust ⁽¹⁾ | | |
| Common Stock | | | | | | | | | | | | | | | | 3,448 | | D | | |
| | 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 | | 3A. Deem Execution if any (Month/Da | Date, | Date, Transact | | n of Deriv Secu Acqu (A) o Disp of (D | of I | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price o Derivative Security (Instr. 5) | | / Di or (I) | o. wnership orm: rect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or | ount ober res | | | | | | |

Explanation of Responses:

1. Trust for benefit of spouse.

/s/ William Westerfield 09/20/2013

** Signature of Reporting Person Da

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.