FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPR	OMB APPROVAL							
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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 Add	s V LP	2. Date of Event Requiring Statement (Month/Day/Year) 11/09/2018 3. Issuer Name and Ticker or Trading Symbol LIFETIME BRANDS, INC [LCUT]								
(Last) (First) (Middle) C/O CENTRE PARTNERS MANAGEMENT LLC					Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)		
_	VENUE, 40TH	I FLOOR			Officer (give title below)	Other (spe below)	, I o.	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) NEW YORK	NY	10022							y More than One	
(City)	(State)	(Zip)								
		Т	able I - Non	-Derivati	ve Securities Beneficiall	y Owned				
1. Title of Securi	ty (Instr. 4)	Т	able I - Non	2.	ve Securities Beneficiall Amount of Securities eneficially Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	cṫ (D) (In:	lature of Indirect str. 5)	Beneficial Ownership	
1. Title of Securi	ty (Instr. 4)		Table II - D	2. Be	Amount of Securities	3. Ownersh Form: Direct or Indirect (Instr. 5)	et (D) (In:		Beneficial Ownership	
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Explanation of Responses:

Remarks

The reporting person may be deemed to be part of a group that beneficially owns more than 10% of the outstanding common stock of the Issuer.

No securities are beneficially owned.

Centre Capital Investors V LP,

By: /s/ Bruce G. Pollack,

11/14/2018

Authorized Person

** 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 5 (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.