FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washi

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ngton, D.C. 20549 | OMB APPROVAL |
|-------------------|--------------|
| | |

| OMB Number: | 3235-0287 |
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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* Shindel Sara (Last) (First) (Middle) | | | | | | Issuer Name and Ticker or Trading Symbol LIFETIME BRANDS, INC [LCUT] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | eck all app Direct Office below | icable) or r (give title) | | 10% Ow Other (s below) | ner pecify |
|---|--|------------|--|--|----------------------------|--|-------|----------------------------|---|--------|-----------------|---------------------------------------|--|---|-------------------------------------|---|--|--|
| LIFETIME BRANDS INC. 1000 STEWART AVENUE | | | | 05/ | 05/07/2010 | | | | | | | | | erai Couns | sei an | d Secretar | y | |
| (Street) GARDEN CITY NY 11530 | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | action | 2A. Deemed Execution Date, | | | 3. Transact Code (In | 4. Securities Acquired (a partie) | | ed (A) or | 5. Amo Securit Benefic Owned | nount of Irities Eficially ed Following | | n: Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | Code | v | Amount | (A) o (D) | Price | Reporte Transa (Instr. 3 | ction(s) | | | (Instr. 4) | |
| | 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. Deeme Execution I if any (Month/Day | Date, | Code (In | | | | 6. Date Exer Expiration D (Month/Day/ | ate | Amount of | | f g Security | 8. Price of Derivative Security (Instr. 5) | ative derivativ | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | piration ite | Title | Amount or Number of Shares | | | | | |
| Employee Stock Option (Right to buy) | \$13.27 | 05/07/2010 | | | A | | 5,000 | | (1) | 05 | /06/2020 | Common Stock | 5,000 | (2) | 5,000 | | D | |

Explanation of Responses:

- 1. The options vest 25 percent per year over four years.
- 2. Field intentionally left blank in accordance with the instructions to Form 4.

05/11/2010 Sara Shindel

** 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 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.