FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washington	D C 20540

Washington, D.C. 20549

OMB AF	PROVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per respor	nse: 0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(c). Se	ee Instruction 1	0.																	
1. Name and Address of Reporting Person* SIEGEL DANIEL					2. Issuer Name and Ticker or Trading Symbol LIFETIME BRANDS, INC [LCUT]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
														V		er (give title	9		(specify
(Last) (First) (Middle) C/O LIFETIME BRANDS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 10/04/2024									below) below President						
1000 STEWART AVENUE																			
(Street) GARDE	N NY	γ 1	1530		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	5. Individual or Joint/Group Filing (Check Applica Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St	ate) (2	Zip)																
		Table	l - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or B	ene	icial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day			Execution Date,			ate,			s Acquired (A) or ff (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) o (D)	r Pr	ice	Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock															387	7,912		D	
Common Stock														8,400		I		Spouse	
Common Stock 10/04			10/04/2	:024				G		3,333(1)	A	\$	60 ⁽²⁾	6,733(3)		I		Custodian for son	
Common Stock														3,400(4)		00 ⁽⁴⁾ I		Custodian for son	
		Tal	ble II -								osed of, convertib				Owne	t			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) Execution Date, if any			4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	6. Date Expirat (Month	tion Da			nt of ities lying ative ity (Ins	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

- 1. Bona fide gift made to the child of the reporting person on October 4, 2024 and deposited into the custodial account for that child for which the reporting person is the custodian. The reporting person disclaims any pecuniary interest in the accounts' assets or the donated shares.
- 2. No price is given due to the fact that the acquisition of shares represents a bona fide gift.
- 3. Uniform Transfer to Minors Act Custodian for son 1.
- 4. Uniform Transfer to Minors Act Custodian for son 2

Remarks:

/s/ Sara Shindel, attorney-infact for Daniel Siegel

11/15/2024

** 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.