

# GORDMANS STORES, INC.

# Reported by MOZAFARI RAMIN

### FORM 4

(Statement of Changes in Beneficial Ownership)

### Filed 02/23/17 for the Period Ending 01/30/17

Address 1926 SOUTH 67TH STREET

**OMAHA, NE 68106** 

Telephone 402-691-4000

CIK 0001490636

Symbol GMAN

SIC Code 5600 - Retail-Apparel & Accessory Stores

Industry Department Stores

Sector Consumer Cyclicals

Fiscal Year 01/28



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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *					2. Issuer Name and Ticker or Trading Symbol						bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Mozafari Ra	amin			(	Gord	lmans S	Stores,	Inc. [	[ <b>G</b> ]	MAN]						
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)						Y)	Director			% Owner	C 1 1 \
C/O GORDMANS STORES, INC., 1926 SOUTH 67TH ST				1926	1/30/2017							_X_Officer (g	•	· —	Other (speci	ry below)
5001110/1	(Str	eet)		4	4. If A	mendme	nt, Date (	Origina	al Fi	led (MM/I	DD/YYYY)	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
OMAHA, N		ate) (Zi	ip)									X Form filed by		orting Person One Reporting F	Person	
			Table I	- Non-I	)eriva	tive Secu	ırities A	cquire	d, D	isposed	of, or Bei	neficially Own	ed			
1.Title of Security (Instr. 3)  2. Trans. I			. Trans. Da	Execution Date, if any (Ins		3. Trans. C (Instr. 8)	(	or Disposed of (D) (Instr. 3, 4 and 5)		D) F (1	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)				7. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Tab	ole II - Der	ivative S	Securitie	es Ben	eficially	Owned (	( e.g. , ]	puts	s, calls, v	varrants,	options, conve	rtible sec	eurities)		
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	Date	3A. Deeme Execution Date, if an	(Instr.		e 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number of derivative Securities Beneficially Owned	Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Security			Cod	le V	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Stock option (buy)	\$0.85	1/30/2017		A		27500		<u>(1)</u>	1	1/30/2027	Commo stock, ps value \$0.0	ar 27500	\$0.00	27500	D	

#### **Explanation of Responses:**

(1) The options vest in four equal annual installments beginning on January 30, 2018.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Mozafari Ramin C/O GORDMANS STORES, INC. 1926 SOUTH 67TH ST OMAHA, NE 68106			SVP of Planning and Allocation				

#### **Signatures**

/s/ James B. Brown, attorney-in-fact for Ramin Mozafari	2/23/2017		
** 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 control number.