Kreft Alfred John Form 4 November 02, 2018

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

**OMB APPROVAL** 

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Check this box

obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Kreft Alfred John

2. Issuer Name and Ticker or Trading

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

Symbol

LAKELAND INDUSTRIES INC

[LAKE]

(Last) (First) (Middle)

(Zip)

3. Date of Earliest Transaction

(Month/Day/Year) 10/31/2018

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

10% Owner

Other (specify

3555 VETERANS MEMORIAL

HIGHWAY, SUITE C

(Street)

(State)

4. If Amendment, Date Original

Filed(Month/Day/Year)

below)

6. Individual or Joint/Group Filing(Check Applicable Line)

Director

Officer (give title

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

RONKONKOMA, NY 11779

| 1.Title of<br>Security | 2. Transaction Date (Month/Day/Year) |                        |
|------------------------|--------------------------------------|------------------------|
| (Instr. 3)             |                                      | any<br>(Month/Day/Year |

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

38,159

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A) Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

Common

(City)

Stock, par value \$.01 per share

10/31/2018

1,202

\$0

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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### Edgar Filing: Kreft Alfred John - Form 4

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exerc |            | 7. Titl |          | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|------------|---------|----------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transact   | ionNumber  | Expiration D  | ate        | Amou    | int of   | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/   | Year)      | Under   | lying    | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivativ  | e             |            | Securi  | ities    | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities | S             |            | (Instr. | 3 and 4) |             | Owne   |
|             | Security    |                     |                    |            | Acquired   |               |            | •       |          |             | Follo  |
|             | ,           |                     |                    |            | (A) or     |               |            |         |          |             | Repo   |
|             |             |                     |                    |            | Disposed   |               |            |         |          |             | Trans  |
|             |             |                     |                    |            | of (D)     |               |            |         |          |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |               |            |         |          |             | ,      |
|             |             |                     |                    |            | 4, and 5)  |               |            |         |          |             |        |
|             |             |                     |                    |            | ., and 3)  |               |            |         |          |             |        |
|             |             |                     |                    |            |            |               |            |         | Amount   |             |        |
|             |             |                     |                    |            |            | Data          | Evaluation |         | or       |             |        |
|             |             |                     |                    |            |            | Date          | Expiration | Title   | Number   |             |        |
|             |             |                     |                    |            |            | Exercisable   | Date       |         | of       |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |               |            |         | Shares   |             |        |

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Kreft Alfred John 3555 VETERANS MEMORIAL HIGHWAY SUITE C RONKONKOMA, NY 11779

# **Signatures**

/s/ Alfred John Kreft 11/02/2018

\*\*Signature of Date Reporting Person

# **Explanation of Responses:**

- \* 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).
- (1) Restricted Shares granted pursuant to the 2017 Equity Incentive Plan which vest on the second anniversary of the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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