Edgar Filing: COFFEY LAURA A - Form 4

COFFEY L	AURA A											
Form 4												
June 27, 20	18											
FORM	ЛЛ								PPROVAL			
	UNITED	STATES		RITIES A shington			COMMISSIO	N OMB Number:	3235-0287			
Check this box									January 31,			
if no lon subject t	- NIATHA	AENT O	F CHAN	NGES IN	BENEF	ICIAL OV	WNERSHIP OF	Expires:	2005			
Section									Estimated average burden hours per			
Form 4								response	•			
Form 5	Filed put	suant to S	Section	16(a) of th	ne Securi	ties Exchai	nge Act of 1934,					
obligatio	ons Section 17(of 1935 or Secti	on				
may con	itinue.			•	U	ny Act of 1						
<i>See</i> Insta 1(b).	ruction	00(11)	01 010 1		. compu							
1(0).												
(Print or Type	Responses)											
× 21	1											
1. Name and	Address of Reporting	Person *	2 Iccu	er Name an	d Ticker o	Trading	5. Relationship	of Reporting Per	son(s) to			
COFFEY L	1 0			Iccuar			Issuer					
0011211			Symbol									
			PIEK I	R 1 IMPORTS INC/DE [PIR] (C				neck all applicable)				
(Last)	(First) (A	Middle)	3. Date of	of Earliest T	ransaction							
			(Month/				Director					
	1 IMPORTS, INC	2., 100	06/26/2	6/2018X_Offi				(give title Other (specify below)				
PIER 1 PL	ACE						· · · · · · · · · · · · · · · · · · ·	usiness Develop	oment			
				1 (D		1	-					
(Street) 4. If Am- Filed(Mo				endment, D	-	11	6. Individual or Joint/Group Filing(Check					
				onth/Day/Yea	r)		Applicable Line)	ne) ed by One Reporting Person				
FORTWO	DTU TV 76102							More than One R				
FURI WU	RTH, TX 76102						Person		1 0			
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned			
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securit	ties	5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Year)	Execution	Date, if	Transactio			Securities	Form: Direct	Indirect			
(Instr. 3)		any		Code	Disposed		Beneficially	(D) or Indirect				
		(Month/Da	ay/Year)	(Instr. 8)	(Instr. 3,	4 and 5)	Owned	(I)	Ownership			
							Following Reported	(Instr. 4)	(Instr. 4)			
						(A)	Transaction(s)					
						or	(Instr. 3 and 4)					
				Code V	Amount	(D) Price	(incur o und i)					

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

Persons who respond to the collection of information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

 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	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	ionNumber	Expiration Date	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/Year)	Underlying	Security	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8	Se Ac (A Di of (Ir	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Secur (Instr	ities . 3 and 4)	(Instr. 5)	Bene Owne Follo Repo Trans (Instr	
			Code V	V (A	.) (E		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships									
1	Director	10% Owner	Officer	Other						
COFFEY LAURA A C/O PIER 1 IMPORTS, INC. 100 PIER 1 PLACE FORT WORTH, TX 76102			EVP- Busines Development	S						
Signatures										
/s/ Laura A. Coffey By: Michael Atty-on-Fact	A. Carter,		06/27/2018							
<u>**</u> Signature of Reporting	Person		Date							

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).

Remarks:

Reporting officer is no longer an executive officer.

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.