## Edgar Filing: PIER 1 IMPORTS INC/DE - Form 4

PIER 1 IMPO	ORTS INC/DI	Ξ									
Form 4											
April 12, 201											
FORM	<b>14</b>		CECUI				NCE	COMMERCION	т	PPROVAL	
	UNITE	D STATES			AND EX , D.C. 20		NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long	ter.								Expires:	January 31	
subject to		EMENT O	F CHAN			ICIA	LOW	NERSHIP OF	Estimated a	2005 average	
Section 1	Section 16. SECUR					RITIES				irs per	
Form 4 or Form 5			a	<i>(</i> () 0.1	a .				response	0.5	
obligation	no -	•					-	ge Act of 1934,			
may cont	inue. Section			•	•	· ·		of 1935 or Sectio	n		
See Instru	iction	50(II)	of the m	ivestment	t Compan	y Ac	1 01 19	40			
1(b).											
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and Ticker or Trading						5. Relationship of Reporting Person(s) to					
				ymbol				Issuer			
				IMPORT	ΓS INC/D	E [P]	IR]	(Check all applicable)			
(Last)	ast) (First) (Middle) 3. Date of Earliest Transaction					(Chev	ek un appliedor				
(Month/ 100 PIER 1 PLACE 04/10/2				onth/Day/Year)				Director 10% Owner			
				016				XOfficer (give titleOther (specify below) below)			
								· · · · · · · · · · · · · · · · · · ·	ice Pres - Mark	eting	
	(Street)		4. If Ame	ndment, D	ate Origina	1		6. Individual or J	oint/Group Fili	ng(Check	
				nth/Day/Yea	-			Applicable Line)			
``````````````````````````````````````								_X_ Form filed by			
FORT WOR	RTH, TX 7610	2						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tabl	la I Non I	Dominativa	Soon	ition A a	quired, Disposed o	f or Ponoficia	lly Owned	
		-						- · -		•	
1.Title of Security	2. Transaction I (Month/Day/Ye		eemed3.4. Securities Acquiredtion Date, ifTransaction(A) or Disposed of					5. Amount of Securities	6. Ownership Form: Direct		
(Instr. 3)	(Wondin Day) 10	any	JII Date, II	Code (D)					(D) or	Beneficial	
		(Month/	Day/Year)	(Instr. 8)	(Instr. 8) (Instr. 3, 4 and 5)				Indirect (I)		
								Following ( Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
common	04/10/0016						\$	02 460 005	D		
stock	04/10/2016			F	999	D	6.29	92,469.087	D		

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 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
HUNTER ERIC W 100 PIER 1 PLACE FORT WORTH, TX 76102			Exec. Vice Pres - Marketing					
Signatures								
/s/ Eric W. Hunter By: Christopher L. Mabe, Atty-in-Fact			04/12/2016					
<u>**</u> Signature of Reporting	ng Person		Date					
Explanation of Posponsos:								

## **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).

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.