Edgar Filing: KIRKLAND'S, INC - Form 4/A

KIRKLAND	'S, INC											
Form 4/A												
June 22, 2015	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т	OMB APPROVAL			
	- UNIT	ED STATES					NGE (COMMISSION	OND	3235-0287		
Check this	s box		vv as	hington,	D.C. 20:	549			Number: Expires:	January 31,		
if no long	er STAT	'FMFNT O	FCHAN	F CHANGES IN BENEFICIAL OWNERSHIP OI						2005		
										Estimated average		
Section 10 Form 4 or		SECUKITIES								burden hours per response 0.5		
Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								0.0		
obligation	¹⁸ Section	*					•	f 1935 or Sectio	n			
may conti <i>See</i> Instru	nue.) of the Inv	•	•	- ·						
1(b).	etion				-							
(Print or Type R	esponses)											
1 Name and A	ddrass of Paport	ing Derson *	. .		T . 1	n 1.		5 Palationship o	f Deporting Der	son(s) to		
1. Name and Address of Reporting Person <u>*</u> Orr Wilson R III			2. Issuer Symbol	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			•	ND'S IN	IC IKIR	K1						
	KIRKLAND'S, INC [KIRK]					(Check all applicable)						
(Last)	(First)	(Middle)		Earliest Tra	insaction			_X_ Director	100	Owner		
C/O SSM VI	(Month/Day/Year) 06/11/2014					_X_ Director 10% Owner Officer (give title Other (specify						
	, 6070 POPL	AR	00/11/20	/17				below)	below)			
AVENUE, S												
	(Street)		4 If Amer	ndment Dat	e Original			6 Individual or I	oint/Group Fili	ng(Check		
(oucci)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)				
				09/10/2014					_X_ Form filed by One Reporting Person			
MEMPHIS,	TN 38119							Form filed by 1 Person	More than One R	eporting		
(City)	(State)	(Zip)										
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction			3. 4. Securities				5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Y	any	on Date, if TransactionAcquired (A) or Code Disposed of (D)					Securities Beneficially	(D) or Benefic	Indirect Beneficial		
(11001.0)			/Day/Year)	ay/Year) (Instr. 8) (Instr. 3, 4 and 5)				Owned		Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or	D.	(Instr. 3 and 4)				
Common				Code V	Amount 4,144	(D)	Price					
Stock	06/11/2014			А	4,144 (1)	А	\$0	30,320	D			
Stock												

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	⁷ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address				
1	Director	10% Owner	Officer	Other
Orr Wilson R III C/O SSM VENTURE PARTNERS 6070 POPLAR AVENUE, SUITE 560 MEMPHIS, TN 38119	Х			
Signatures				
/s/ Adam Holland, Attorney In Fact for D Orr, III	R. Wilson	I	06/16	/2015
** Signature of Reporting Person			Dat	te

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) The number of restricted stock units was increased in connection with \$1.50 special dividend declared on May 21, 2015.

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.