Edgar Filing: Michaels Companies, Inc. - Form 4

Michaels Con	mpanies, Inc.												
Form 4													
October 13, 2	2015												
FORM	14									OMB AF	PPROVAL		
	UNITE	D STATES				ND EX(D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287		
Check thi if no long	ter.									Expires:	January 31,		
subject to		EMENT O	F CHAN	HANGES IN BENEFICIAL OWN					NERSHIP OF	Estimated a	2005 Iverage		
Section 1	16.				JRI	TIES				burden hours per			
Form 4 or Form 5		aurquant to	Section 1	6(a) of	tha	Soourit	ion E	vohona	h A at of 1024	response 0			
obligation	no -							U	e Act of 1934, 1935 or Sectior	,			
may cont	inue.		of the In	•		•	· ·			1			
See Instru 1(b).	iction	50(11)		vestille		compun	<i>y</i> 110		0				
-(-).													
(Print or Type F	Responses)												
							5. Relationship of Issuer	f Reporting Person(s) to					
-				Symbol					155001				
				Michaels Companies, Inc. [MIK]					(Check all applicable)				
(Last) (First) (Middle) 3. Date				te of Earliest Transaction									
				th/Day/Year)					Director X Officer (give	Owner er (specify			
8000 DENI	10/12/2	10/12/2015					below) below)						
									EVP - S	Store Operation	18		
				ndment, Date Original					6. Individual or Joint/Group Filing(Check				
				onth/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
IRVING, TX	X 75063								Form filed by M				
	A 75005								Person				
(City)	(State)	(Zip)	Tabl	e I - Nor	1-De	erivative	Secur	ities Acq	uired, Disposed of,	, or Beneficial	ly Owned		
1.Title of	2. Transaction I	3. 4. Securities Acquired						6. Ownership					
Security (Instr. 3)	(Month/Day/Year) Execution Date, if any			Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(mout o)		(Month/Day/Yea				(111511. 5,	i una	5)	•		Ownership		
									Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported Transaction(s)				
				Cada	v	Amount	or	Drice	(Instr. 3 and 4)				
Common					v	Amount	(D)	Price \$					
Stock	10/12/2015			F <u>(1)</u>		1,199	D	¢ 23.67	32,005	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. iorNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration E (Month/Day e	Date Exercisable and Date Date Onth/Day/Year)		le and ant of rlying ities . 3 and 4)	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

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Bachmeier Theodore J. 8000 BENT BRANCH DRIVE IRVING, TX 75063			EVP - Store Operations					
Signatures								
Michael J. Veitenheimer, as attorney-in-fact	10/13/2015							
**Signature of Reporting Person		D	ate					

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) Withholding of restricted stock to satisfy reporting person's tax obligation upon the restriction lapse of a restricted stock award.

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.