#### LEATHER FACTORY INC

Form 5

February 14, 2005

#### **OMB APPROVAL** FORM 5

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

burden hours per OWNERSHIP OF SECURITIES response...

**OMB** 

Number:

Expires:

Estimated average

3235-0362

January 31,

2005

1.0

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person ** GREENE SHANNON L			2. Issuer Name <b>and</b> Ticker or Trading Symbol LEATHER FACTORY INC [TLF]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended	(Check all applicable)			
3800 FALC	ON LAKE D	RIVE	(Month/Day/Year) 12/31/2004	X Director 10% OwnerX Officer (give title Other (specify below) CFO/TREASURER			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Reporting			
			Filed(Month/Day/Year)	(check applicable line)			
ARLINGTON, TX 76016				_X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person			

(City)	(State) (Z	Table Table	I - Non-Deriv	ative Secu	urities	Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi Acquired Disposed (Instr. 3,	d (A) of (D) 4 and (A) or	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK, PV \$0.0024	Â	Â	Â	Â	Â	Â	16,916.931	D	Â
COMMON STOCK, PV \$0.0024	Â	Â	Â	Â	Â	Â	10,288.0235	I	BY ESOP

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.

SEC 2270 (9-02)

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# $\label{thm:convertible} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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. Transaction Code (Instr. 8)	5. Numof Deriv Secur Acqu (A) o Dispo of (D (Instr 4, and	vative rities ired or cosed o) : 3,	S		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
QUALIFIED INCENTIVE STOCK OPTION (1)	\$ 0.6875 (2)	Â	Â	Â	Â	Â	(2)	09/25/2007	COMMON STOCK, PV \$0.0024	10,0
QUALIFIED INCENTIVE STOCK OPTION (1)	\$ 0.9375 (3)	Â	Â	Â	Â	Â	(3)	09/13/2010	COMMON STOCK, PV \$0.0024	50,0
QUALIFIED INCENTIVE STOCK OPTION (1)	\$ 1.35 (4)	Â	Â	Â	Â	Â	(4)	05/24/2011	COMMON STOCK, PV \$0.0024	60,0
QUALIFIED INCENTIVE STOCK OPTION (1)	\$ 4.24 <u>(5)</u>	Â	Â	Â	Â	Â	(5)	09/16/2013	COMMON STOCK, PV \$0.0024	25,0

# **Reporting Owners**

Reporting Owner Name / Address	Relationships								
noporous o mar rumo, rauness	Director	10% Owner	Officer	Other					
GREENE SHANNON L 3800 FALCON LAKE DRIVE ARLINGTON, TX 76016	ÂΧ	Â	CFO/TREASURER	Â					

## **Signatures**

SHANNON L. 02/14/2005 GREENE

\*\*Signature of Reporting Date
Person

Reporting Owners 2

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## **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) GRANTED PURSUANT TO THE TERMS OF THE 1995 STOCK OPTION PLAN OF THE LEATHER FACTORY, INC. FOR KEY MANAGEMENT EMPLOYEES.
- (2) THE OPTIONS BECOME VESTED IN 5 EQUAL ANNUAL INSTALLMENTS COMMENCING 09/25/98.
- (3) THE OPTIONS BECOME VESTED IN 5 EQUAL ANNUAL INSTALLMENTS COMMENCING 09/13/01.
- (4) THE OPTIONS BECOME VESTED IN 5 EQUAL ANNUAL INSTALLMENTS COMMENCING 05/24/02.
- (5) THE OPTIONS BECOME VESTED IN 5 EQUAL ANNUAL INSTALLMENTS COMMENCING 09/16/04.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.