#### BARON JOSEPH M Form 4

March 05, 2007

# FORM 4

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

1(b).

(Print or Type Responses)

03/02/2007

Stock

1. Name and Address of Reporting Person * BARON JOSEPH M			2. Issuer Name <b>and</b> Ticker or Trading Symbol CHARMING SHOPPES INC [CHRS]					ng	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				DirectorX Officer (give		Owner er (specify			
450 WINK	S LANE		(Month/Day/Year) 03/02/2007					below) below)  EVP/Chief Operating Officer				
	(Street)		4. If Ame	ndment, D	dment, Date Original				6. Individual or Joint/Group Filing(Check			
	Filed(Month/Day/Year)					Applicable Line)						
									_X_ Form filed by One Reporting Person Form filed by More than One Reporting			
BENSALEM, PA 19020									Person	viore than One Re	porting	
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									ly Owned		
1.Title of	2. Transaction Da	ate 2A. Dee	med	3.	4. 5	Securit	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	r) Execution	on Date, if	Transact	ion(A)	) or Di	spose	d of (D)	Securities	Form: Direct	Indirect	
(Instr. 3)		any		Code	,	str. 3,	4 and	5)	Beneficially	(D) or	Beneficial	
		(Month/	Day/Year)	(Instr. 8)					Owned	Indirect (I)	Ownership	
									Following Reported	(Instr. 4)	(Instr. 4)	
							(A)		Transaction(s)			
				~			or		(Instr. 3 and 4)			
(City) (State) (Zip)  1.Title of 2. Transaction Date 2A Security (Month/Day/Year) Excursion (Instr. 3) any				Code V	An	nount	(D)	Price	,			
Common	03/02/2007			E	1 (	066	D	\$	160 008	D		

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

F

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 1474

(9-02)

160,998

12.05

D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1.066

#### Edgar Filing: BARON JOSEPH M - Form 4

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.  onNumber of Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	of ng s	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5)  (A) (D)	Date Exercisable	Expiration Date	or Title Nu of	umber		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

BARON JOSEPH M 450 WINKS LANE BENSALEM, PA 19020

**EVP/Chief Operating Officer** 

## **Signatures**

JOSEPH M. 03/02/2007 BARON

\*\*Signature of Date
Reporting Person

### **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.

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