FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

							. ,															
1. Name and Address of Reporting Person* <u>SMITH SHAWN E</u>						2. Issuer Name and Ticker or Trading Symbol CATO CORP [ CTR ]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						[											Direc	tor		10% C	wner	
-					-										_	X		er (give title			specify	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)										71	belov	,		below)		
` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					02/	02/08/2008											SVI	P - GENER	RAL	COUNSE	L	
P.O. BOX 34216																						
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street)															Line)							
CHARLOTTE		NC 28234421		6												X	Form	Form filed by One Reporting Person				
				-												Form filed by More than One Reporting Person				orting		
(City) (State)		tate) (	(Zip)														Pers	OH				
		Tabl	e I - Non	-Deriv	ative	Se	curitie	s Ac	quir	ed, D	isp	osed o	f, or	Ben	eficia	ally C	wne	ed				
1. Title of Security (Instr. 3) 2. Transac						ction 2A. Deemed			3. 4. Securities A				ties Ac	quired	(A) or		i. Amo	urities For eficially (D)		Ownership	7. Nature of Indirect Beneficial Ownership	
Date							Execution Date, if any (Month/Day/Year		,   Tr	Transaction Disposed		d Of (D) (Instr. 3, 4			4 and Securi Benefi		orm: Direct ) or Indirect (Instr. 4)					
(Month					Dayre																	
						Ė						(A) or			Repor					(Instr. 4)		
									C	ode	′	Amount	- [8	D)	Price		Transaction(s) (Instr. 3 and 4)					
CLASS A COMMON STOCK																1,149			D			
		Tr	ıble II - D	Orivat	ivo S	ACII	ritios	Λcau	uirod	l Die	200	end of	or B	nofi	ciall	· · ·	nad		,			
		16										nvertib				y Ow	iicu					
1. Title of	2.	3. Transaction	3A. Deeme	ed	4.				6. Date Exercisable and Expiration Date			able and	7. Title and			8. Price o		ve derivative		Ownership	11. Nature of Indirect Beneficial	
Derivative	Conversion	Date	Execution I	Date,	Transa							Amount of			Deriva							
Security (Instr. 3)	or Exercise Price of	(Month/Day/Year)	if any (Month/Da	v/Year)	Code ( 8)	ınstr.			(Month/Day/Year) Securities Underlyin						Secur (Instr.		Beneficially		Form: Direct (D)	Ownership		
,	Derivative		[,	`			Acquired		Derivative						·	Owned		or Indirect	(Instr. 4)			
Security								(A) or Disposed		Security (Instr. and 4)				str. 3			Following Reported		(I) (Instr. 4)			
					of (D)									Transaction(s)								
							(Instr. 3, 4 and 5)									(Instr. 4)						
			ŀ			<del>1                                    </del>							Amo		1							
														or								
									Date	<u>.</u>	<sub>F</sub>	xpiration		Nur	nber							
					Code	v	(A)	(D)		rcisable		ate	Title	Sha	res							

**Explanation of Responses:** 

Remarks:

By: BRIAN S. MCALPINE, **POWER OF ATTORNEY** 

02/08/2008

\*\* Signature of Reporting Person

Date

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

- \* 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.

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 Number.