FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | | |
| Estimated average b | ourden | | | | | | | | | |

0.5

hours per response:

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

| Name and Address of Reporting Person* HOLTZMAN SEYMOUR | | | | | <u>C</u> | 2. Issuer Name and Ticker or Trading Symbol CASUAL MALE RETAIL GROUP INC [CMRG] | | | | | | | | Relationship of the Relati | cable) or | g Pers | 10% O | vner | | |
|---|---|--|---|------------|----------|--|---|--------|---|--------|--|---|--|--|--|---|--|---|--|--|
| (Last) | t) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/19/2009 | | | | | | | | (give title | | Other (s below) | specify | | |
| (Street) (City) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| | | Tak | Jal Na | D | | - 6- | | A. | | D:- | | .f D | 6: . : . ! | Persor | | | | | | |
| Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | saction | tion 2A. Deeme | | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | d (A) or | 5. Amou 5) Securitie Benefici | nt of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Transact (Instr. 3 | ction(s) | | | (Instr. 4) | | |
| Common Stock, \$0.01 par value 10/19. | | | | | | 2009 | | | M | | 15,000 |) A | \$1.187 | 75 3,875,069 | | D | | | | |
| Common Stock, \$0.01 par value 10/19. | | | | | | 2009 | | M | | 15,000 |) A | \$1.312 | 25 3,89 | 3,890,069 | | D | | | | |
| | | - | Table II - | | | | | | , | | osed of, convertil | | , | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemo Execution if any (Month/Da | Date, Tran | | ction Instr. | | | 6. Date Exercis Expiration Date (Month/Day/Ye | | e | 7. Title and of Securiti Underlying Derivative (Instr. 3 an | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Non- Qualified Stock Option (right to buy) | \$1.1875 | 10/19/2009 | | | М | | | 15,000 | (1) | | 04/11/2010 | Common Stock | 15,000 | \$0 | 0 | | D | | | |
| Non- Qualified Stock Option (right to | \$1.3125 | 10/19/2009 | | | M | | | 15,000 | (2) | | 06/26/2010 | Common Stock | 15,000 | \$0 | 0 | | D | | | |

Explanation of Responses:

- $1.\ The\ option\ vested\ in\ three\ equal\ installments\ on\ April\ 11,\ 2001,\ April\ 11,\ 2002\ and\ April\ 11,\ 2003.$
- $2. \ The \ option \ vested \ in \ three \ equal \ installments \ on \ June \ 26, \ 2000, \ June \ 26, \ 2001 \ and \ June \ 26, \ 2002.$

Richard L. Huffsmith,

Attorney-in-Fact for Seymour 10/21/2009

Holtzman

** 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.