#### Edgar Filing: Fossil Group, Inc. - Form 4

Fossil Group Form 4													
April 11, 20													
FORM	<b>4</b> UNITED S	STATES						GE C	OMMISSION	OMB	2235-0287		
Check th	is box		vvas	sningt	on,	<b>D.C. 205</b> 4	19			Number: Expires:	January 31,		
if no long subject to Section 1 Form 4 o Form 5	5 <b>SIAIEM</b> 16. or	<b>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF</b> <b>SECURITIES</b> Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,											
obligatio may cont <i>See</i> Instru 1(b).	ns finue. Section 17(a	) of the 1	Public U	tility H	Iold		any A	Act of	1935 or Section	1			
(Print or Type I	Responses)												
	Address of Reporting F IS KOSTA N	Person <u>*</u>	Symbol			Ticker or Tr	ading		5. Relationship of Issuer	Reporting Pers	on(s) to		
(Last)									(Check all applicable)				
901 S. CEN	TRAL EXPRESS	WAY	(Month/D 02/26/20	-	r)				X Director X Officer (give below) Chairman of	title $\_X\_10\%$ title $\$ Other below)	er (specify		
	(Street)		4. If Ame Filed(Mor			te Original			6. Individual or Joi Applicable Line) _X_ Form filed by O	one Reporting Pe	rson		
RICHARDS	SON, TX 75080								Form filed by M Person	ore than One Re	porting		
(City)	(State) (	Zip)	Tabl	e I - No	on-D	erivative Se	curiti	es Acqu	uired, Disposed of,	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)				3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	02/26/2016			J <u>(1)</u>	V	62,498	D	<u>(2)</u>	0	Ι	by GRAT 2014-1		
Common Stock	02/26/2016			J <u>(1)</u>	V	11,110	D	<u>(2)</u>	0	Ι	by GRAT 2014-3		
Common Stock	02/26/2016			<b>J</b> <u>(1)</u>	V	73,608	А	<u>(2)</u>	5,024,627	D			
Common Stock	03/02/2016			J <u>(1)</u>	V	132,369	D	<u>(2)</u>	0	Ι	by GRAT 2013-1		
Common Stock	03/02/2016			<b>J</b> <u>(1)</u>	V	22,061	D	<u>(2)</u>	0	I	by GRAT 2013-3		

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Common Stock	03/02/2016	J <u>(1)</u>	V	22,061	D	<u>(2)</u>	0	Ι	by GRAT 2013-4
Common Stock	03/02/2016	J <u>(1)</u>	V	176,491	А	<u>(2)</u>	5,201,118	D	
Common Stock							450,000	Ι	by GRAT 2015-1
Common Stock							300,000	Ι	by GRAT 2015-2
Common Stock							70,000	Ι	by GRAT 2015-3

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)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
1 9	Director	10% Owner	Officer	Other					
KARTSOTIS KOSTA N 901 S. CENTRAL EXPRESSWAY RICHARDSON, TX 75080	Х	Х	Chairman of the Board & CEO						

## Signatures

/s/ Kosta N. Kartsotis 04/11/2016 <u>\*\*</u>Signature of Reporting Person Date

#### **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) These transactions are reported as acquisitions or dispositions, however the transactions reflect a change in beneficial ownership to or from a Grantor Retained Annuity Trust.
- (2) Not applicable.

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.