

Fossil Group, Inc.  
Form 3  
June 07, 2016

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2015  
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Evans Steve Andrew		(Month/Day/Year)	Fossil Group, Inc. [FOSL]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		05/31/2016		
901 S. CENTRAL EXPRESSWAY			(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
RICHARDSON, Â TX Â 75080			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			Executive Vice President	
				6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	16,708 <sup>(1)</sup>	D	Â

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Title			

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	Expiration Date	Expiration Date	Amount or Number of Shares	Amount or Number of Shares	or Indirect (Instr. 5)	
Stock Appreciation Right	07/15/2015 <sup>(2)</sup>	07/15/2022	Common Stock	5,101	\$ 101.365	D Â
Stock Appreciation Right	03/15/2016 <sup>(3)</sup>	03/15/2023	Common Stock	5,295	\$ 80.215	D Â
Stock Appreciation Right	03/15/2017 <sup>(4)</sup>	03/15/2024	Common Stock	10,287	\$ 47.985	D Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Evans Steve Andrew 901 S. CENTRAL EXPRESSWAY RICHARDSON, TX 75080	Â	Â	Â Executive Vice President	Â

## Signatures

/s/ Steve Andrew  
Evans

06/07/2016

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) This amount includes 15,572 restricted stock units [Vests as 576 on 7/15/16, 575 on 7/15/17; 1432 on 3/15/17, 1431 on 3/15/18, 912 on 3/15/19; 3549 on 11/24/16, 3549 on 11/24/17, and 3548 on 11/24/18] and also includes 341 shares held through a 401(k) plan account as of 6/1/16.
  - (2) Exercisable as to 1/3 on 7/15/15; as to 1/3 on 7/15/16; and as to 1/3 on 7/15/17, cumulatively.
  - (3) Exercisable as to 1/3 on 3/15/16; as to 1/3 on 3/15/17; and as to 1/3 on 3/15/18, cumulatively.
  - (4) Exercisable as to 1/3 on 3/15/17; as to 1/3 on 3/15/18; and as to 1/3 on 3/15/19, cumulatively.

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### Remarks:

POWER OF ATTORNEY: KNOW ALL MEN BY THESE PRESENTS, that Steve Andrew Evans her

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.