Edgar Filing: HELEN OF TROY LTD - Form 4

HELEN OF 7	FROY LTD											
Form 4	2015											
September 03												
FORM	4 _{UNITED}) STATES	SECUR	ITIES A	ND EX(THAT	NGE (COMMISSION	r	OMB APPROVAL		
	UNITED	JAIL		hington,			UL		OMB Number:	3235-0287		
Check this					210120				Expires:	January 31		
Section 16.				GES IN BENEFICIAL OWNERSHIP OF SECURITIES				NERSHIP OF	Estimated average burden hours per			
Form 5 obligation may conti	obligations may continue. See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940						response 0.					
(Print or Type R	esponses)											
1. Name and Address of Reporting Person * Woody Darren G			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			HELEN	OF TRO	Y LTD [HEL	E]	(Chec	ck all applicable	e)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction									
1 HELEN OF TROY PLAZA 09/01/2 (Street) 4. If Am Filed(Mo				(Month/Day/Year) 09/01/2015					X_ Director10% Owner Officer (give titleOther (specify below)below)			
				f Amendment, Date Original d(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 				
EL PASO, T	X 79912							Person		eporting		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Aco	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	any		emed on Date, if 'Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A))	SecuritiesHBeneficially(OwnedHFollowing(ReportedH	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or	Price	Transaction(s) (Instr. 3 and 4)				
Common Shares, par value \$0.10	09/01/2015			А	214	А	$\frac{(1)}{(2)}$	2,490	D			
per share												

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivati Securitic Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Da (Month/Day/Y ve ss 1	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common share tax-offset right	<u>(2)</u>	09/01/2015		A	0 (2)	09/01/2015	09/01/2015	Common share tax-offset right	0 (2)	
Common share tax-offset right	(2)	09/01/2015		Х	0	09/01/2015	09/01/2015	Common share tax-offset right	0 (2)	

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Woody Darren G 1 HELEN OF TROY PLAZA EL PASO, TX 79912	Х							
Signatures								
Vincent D. Carson as Attorney Woody	09/03/2015							

<u>**Signature of Reporting Person</u>

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).

Date

- (1) Grant of restricted stock, which vested immediately and is accompanied by a tax-offset right.
- (2) The accompanying tax-offset right entitles the reporting person to receive, upon vesting of the restricted stock, a cash amount to pay certain tax liabilities incurred in connection with the event.

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.