Edgar Filing: RAFF BERYL - Form 4

RAFF BERY	L											
Form 4												
December 05	, 2017											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	UNITED	STATES		ITIES Af hington, 1			NGE (COMMISSION	OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	er STATE 5. Filed pu ^s Section 17	STATEMENT OF CHANGES IN 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 20(b) of the Investment Company Act of 1940							burden hou response	Estimated average burden hours per response 0.		
(Print or Type R	esponses)											
1. Name and Address of Reporting Person <u>*</u> RAFF BERYL			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
		HELEN OF TROY LTD [HELE]				E]	(Check all applicable)					
(Last)	(First)	(Middle) 3. Date of Earliest Transaction										
			12/01/2017 —					X Director Officer (give below)	Officer (give title Other (specify			
File				4. If Amendment, Date 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 				
EL PASO, T	X 79912							Person	viole mail one it	eporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execution any	emed on Date, if /Day/Year)	3. Transactio Code (Instr. 8)	Disposed (Instr. 3,	d (A) or d (A) or d (D) d (f) (D) d (f) (D) d (f)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	(D) or E Indirect (I) C	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Shares, par value \$0.10 per share	12/01/2017			A A	Amount 197		$\frac{(1)}{(2)}$	2,891	D			

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)

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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. Transactiv Code (Instr. 8)	orNumber of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. P Der Secu (Ins
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Common share tax-offset right	<u>(2)</u>	12/01/2017		A	0 (2)		12/01/2017	12/01/2017	Common share tax-offset right	0 (2)	
Common share tax-offset right	(2)	12/01/2017		X		0	12/01/2017	12/01/2017	Common share tax-offset right	0 (2)	

Reporting Owners

Reporting Owner Name / Address	Relationships							
I B	Director	10% Owner Officer		Other				
RAFF BERYL 1 HELEN OF TROY PLAZA EL PASO, TX 79912	Х							
Signatures								
Vincent D. Carson as Attorney- B. Raff	12/05/2017							

**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) Grant of restricted stock, which vested immediately and is acccompanied 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.