FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
Lotimatou avorago bare								
hours per response:								
p soponoo.	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  MILLER WAYNE S				2. Issuer Name and Ticker or Trading Symbol G III APPAREL GROUP LTD /DE/ [ GIII ]  3. Date of Earliest Transaction (Month/Day/Year)							3III ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify						
(Last)	(Last) (First) (Middle)					10/06/2015							X	belov	er (give title w)	Other below	` '	
C/O G-III APPAREL GROUP, LTD.														Chief Operating Officer				
512 SEVENTH AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)								· .	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													X Form filed by One Reporting Person					
NEW YORK NY 10018												Form filed by More than One Reporting Person						
(City) (State) (Zip)																		
		Table	e I - Non-Deriv	ative	Secu	ırities	Acc	quire	ed, D	isposed o	f, or E	Benefic	ially	Owne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea				2A. Deemed Execution Date, if any (Month/Day/Year)		Date, T		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5) Secur		ficially ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Co	de	v	Amount	(A) or (D)	Price		Repo Trans		(11301. 4)	(1134. 4)		
Common Stock, Par Value \$.01 Per Share			10/06/2015				S		23,809(1)	D	\$64.7399(2)		232,889		D			
Common Stock, Par Value \$.01 Per Share			10/08/2015				S		11,191	D	\$64.786 <sup>(3)</sup>		221,698		D			
	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)	Code	saction (Instr.	5. Num of Deriva Securi Acqui (A) or Dispo of (D) (Instr., and 5)	itive ities red sed 3, 4	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)  Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. Represents shares withheld to satisfy the Reporting Person's tax obligations in connection with the vesting of 45,000 restricted stock units.
- 2. The reported price represents the weighted average price for shares sold in multiple transactions ranging from \$63.50 to \$65.48. The details of the amounts and prices will be provided to the Issuer, any shareholders of the Issuer or the SEC on request.
- 3. The reported price represents the weighted average price for shares sold in multiple transactions ranging from \$64.50 to \$64.90. The details of the amounts and prices will be provided to the Issuer, any shareholders of the Issuer or the SEC on request.

<u>/s/ Wayne Miller</u> <u>10/08/2015</u>

\*\* 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.