## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 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 <sup>*</sup> Goldfarb Jeffrey David				2. Issuer Name and G III APPAR		ing Symbol I <mark>P LTD /DE/</mark> [ GIII ]	(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last)	(First)	(Mid	dle)	3. Date of Earliest T 10/06/2015	Transaction (Mo	onth/Day/Year)	X	Director Officer (give title below)		(specify		
C/O G-III APPAREL GROUP, LTD. 512 SEVENTH AVENUE				4. If Amendment, D	ate of Original	Filed (Month/Day/Year)	Line)	vidual or Joint/Group Filing (Check Applicable				
(Street)						X	Form filed by One Reporting Person					
NEW YORK	NY	100	018					Form filed by Mor Person	e than One Re	oorting		
(City)	(State)	(Zip)	)									
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1 Title of Security (Instr. 3) 2. Transaction				2A. Deemed	3.	4. Securities Acquired (A) o	r	5. Amount of	6. Ownership	7. Nature		

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of		ed (A) or tr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)
Common Stock, Par Value \$.01 Per Share	10/06/2015	S		11,984(1)	D	\$64.1112 <sup>(2)</sup>	351,270	D	
Common Stock, Par Value \$.01 Per Share	10/07/2015	s		<b>699</b> <sup>(1)</sup>	D	\$63.0645 <sup>(3)</sup>	350,571	D	
Common Stock, Par Value \$.01 Per Share							24,896	I	Amanda Julie Goldfarb 2007 Trust
Common Stock, Par Value \$.01 Per Share							2,200	I	Ryan Gabriel Goldfarb 2009 Trust

	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. Transac Code (Ir 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents shares sold to satisfy the Reporting Person's tax obligation in connection with the vesting of 25,000 restricted stock units.

2. The reported price represents the weighted average price for shares sold in multiple transactions ranging from \$63.50 to \$65.49. 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 \$63.05 to \$63.12. The details of the amounts and prices will be provided to the Issuer, any shareholders of the Issuer or the SEC on request.

## /s/ Jeffrey Goldfarb

\*\* Signature of Reporting Person Date

10/08/2015

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.