Edgar Filing: HELEN OF TROY LTD - Form 4

HELEN OF 7	FROY LTD										
Form 4	4 2014										
September 04											
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549					COMMISSION		APPROVAL 3235-0287			
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 BENEFICIA SECURITIES Filed pursuant to Section 16(a) of the Securities I Section 17(a) of the Public Utility Holding Compar 30(h) of the Investment Company A					es Ez pany	Estimated aver burden hours p response Exchange Act of 1934, ny Act of 1935 or Section					
(Print or Type R	Responses)										
Woody Darren G Symbol HELE (Last) (First) (Middle) 3. Date (Month 1 HELEN OF TROY PLAZA 09/02/ (Street) 4. If An			2. Issuer Symbol	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)			
			(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 09/02/2014				_X_ Director 10% Owner Officer (give title Other (specify below) below)			
				If Amendment, Date Original ed(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	TX 79912							Form filed by I Person	More than One R	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Executi any	emed on Date, if /Day/Year)	3. Transactio Code (Instr. 8)	(A)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	5. Ownership Form: Direct D) or Indirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Shares, par value \$0.10	09/02/2014			Code V	Amount 301	or (D) A	Price $\begin{pmatrix} 0 \\ (1) \\ (2) \end{pmatrix}$	(Instr. 3 and 4) 9,781	D		
per share							(2)				

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 es d	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	(2)	09/02/2014		A	0 (2)	09/02/2014	09/02/2014	Common share tax-offset right	0 (2)	
Common share tax-offset right	(2)	09/02/2014		Х	0	09/02/2014	09/02/2014	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	09/04/2014							

**Signature of Reporting Person

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 entitled 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.