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FOSSIL IN	С											
Form 4												
April 13, 20)09											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check the	his box		***	ishington	I, D.C. 20	347				January 31,		
if no lor		MENT OI	F CHAI	NGES IN	BENEF	ICIA	LOWN	ERSHIP OF	Expires:	2005		
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES								Estimated average burden hours per				
Form 4									response	0.5		
Form 5	Filed put	rsuant to S	Section	16(a) of t	he Securi	ties E	Exchange	Act of 1934,				
obligation may cor				•	•	· ·	•	1935 or Section				
See Inst		30(h)	of the I	nvestmen	t Compar	ny Ac	ct of 1940)				
1(b).												
(Print or Type	Responses)											
(I fine of Type	responses											
1. Name and	Address of Reporting	Person *	2. Issu	er Name and Ticker or Trading 5			5. Relationship of Reporting Person(s) to					
KARTSOTIS KOSTA N Symbo				- L				Issuer				
								(Check all applicable)				
(Last)	(First) (Middle)	3. Date	of Earliest 7	Fransaction			(Check)		
			(Month/	nth/Day/Year)			_X_ DirectorX_ 10% Owner					
2280 N. GREENVILLE AVE. 04/09				f/(17)/(2)(10)				_X_ Officer (give title Other (specify below) below)				
									CEO			
(Street) 4.]			4. If Am	I. If Amendment, Date Original 6				6. Individual or Joint/Group Filing(Check				
				· · · · · · · · · · · · · · · · · · ·				Applicable Line)				
DIGILLED								_X_ Form filed by On Form filed by Mo				
RICHARD	SON, TX 75082							Person	sie man one ree	Jorning		
(City)	(State)	(Zip)	Tał	ole I - Non-	Derivative	Secur	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.	4. Securiti	ies Ac	quired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially Owned	Ownership Form: Direct (D)	Indirect		
(Instr. 3)										Beneficial Ownership		
			iy/ I cai)	(Instr. 0)				Following	or Indirect	(Instr. 4)		
						(A)		Reported	(I)			
						or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
C				Code V	Amount	(D)	Price	(insu: 5 and 1)				
Common Stock	04/09/2009			S	20,000 (1)	D	\$ 177549	7,082,311	D			
Stock					_		17.7548	•				
Common Stock	04/13/2009			S	20,000	D	\$ 18.3297	7,062,311	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KARTSOTIS KOSTA N 2280 N. GREENVILLE AVE. RICHARDSON, TX 75082	Х	Х	CEO				
Signatures							
/s/ Kosta N. 04/ Kartsotis	13/2009						

<u>**</u>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) These sales were made pursuant to a stock sale trading plan (the "Plan") in accordance with guidelines specified by Rule 10b5-1 under the Securities Exchange Act of 1934. The Plan covers the sale of up to 650,000 shares of Fossil, Inc. common stock.

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.