## FORM 4

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

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

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

					_		. ,				ompany Act t								
Name and Address of Reporting Person*     GOLDFARB MORRIS					2. Issuer Name and Ticker or Trading Symbol G III APPAREL GROUP LTD /DE/ [ GIII ]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner  Officer (size title)  Other (check)					
(Last) (First) (Middle) C/O G-III APPAREL GROUP, LTD. 512 SEVENTH AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 04/02/2020									X Officer (give title Other (specify below)  CEO					
(Street) NEW YORK NY 10018			4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person							
(City)																			
			ble I - N	lon-Deriva						d, Di				_	_				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		ear)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			and Securities Beneficially Owned Foll Reported		Form: D (D) or In (I) (Instr		Direct I ndirect E r. 4) (	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Sto	ock, Par	Value \$.01 P	'er	04/02/202	20				Code	V	Amount 16,540	(A) or (D)	\$5.75	<b>5</b> (1)	(Instr. 3 a	nd 4)		D	
Share Common Sto	ock, Par	Value \$.01 P	'er					_			·		<u> </u>						
Share				04/03/20	20				P		14,209	A	\$5.48	8(2)	3,251	,084		D	
Common St Share	ock, Par	Value \$.01 P	'er												200,	000		I	Arlene Goldfarb 2012 Delaware Trust
Common Sto Share	tock, Par	Value \$.01 P	'er												166,	750		I	Goldfarb Family Partners, LLC
Common Sto Share	tock, Par	Value \$.01 P	'er												200,	000		I	Morris Goldfarb 2012 Delaware Trust
Common Stock, Par Value \$.01 Per Share														29,6	666		I Spouse		
Common Stock, Par Value \$.01 Per Share													76,1		175	I		The Morris And Arlene Goldfarb Family Foundation	
			Table I	l - Derivati (e.g., pu							posed of, convertib				/ Owne	d			
Security or (Instr. 3) Pr	tive Conversion Date Exe ty or Exercise (Month/Day/Year) if ar		Deemed 4. cution Date, Tran		saction de (Instr. Securitie Acquirer (A) or Dispose of (D) (Instr. 3, and 5)		rative rities iired r osed )	6. Date Expiration (Month/Dates)		rcisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivativ Security (Instr. 5)		9. Numb derivati Securiti Benefic Owned Followin Reporte Transac (Instr. 4	ve Owner Form: Direct or Indi (I) (Insect ot)		Beneficia Ownersh ect (Instr. 4)	
					Code	e v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amour or Number of Shares	er					

## **Explanation of Responses:**

- 1. The reported price represents the weighted average price for shares purchased in multiple transactions ranging from \$5.73 to \$5.75. The details of the amounts and prices will be provided to the Issuer, any shareholders of the Issuer or the SEC on request.
- 2. The reported price represents the weighted average price for shares purchased in multiple transactions ranging from \$5.47 to \$5.50. The details of the amounts and prices will be provided to the Issuer, any shareholders of the Issuer or the SEC on request.

/s/ Morris Goldfarb

04/06/2020

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.