FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

	JVAL
OMB Number:	3235-0287
Estimated average burd	en
hours per response:	0.5

			Filed pursually to Section 10(a) of the Securities Exchange Act of 1	934		
()			or Section 30(h) of the Investment Company Act of 1940			
1. Name and Addre	1 0	Person*	2. Issuer Name and Ticker or Trading Symbol Zumiez Inc [ZUMZ]		tionship of Reporting P all applicable) Director	erson(s) to Issuer 10% Owner
(Last) 4001 204TH ST	(First) TREET SW	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/02/2014		Officer (give title below)	Other (specify below)
(Street) LYNNWOOD	,	98036	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Fil Form filed by One Re Form filed by More th Person	eporting Person
(City)	(State)	(Zip)				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock	12/02/2014		A		1,814 ⁽¹⁾	A	\$35.71	1,814	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)	4. Transa Code (8)		of Expiratio		Expiration Da	6. Date Exercisable and Expiration Date (Month/Day/Year)		and ht of ties ying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. The shares acquired represent a grant of restricted stock that will vest on May 21, 2015.

Chris K. Visser, Attorney-In-Fact

12/04/2014

** 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.

Power of Attorney

1. Designation of Attorneys-in-Fact. The undersigned, hereby designates each of Chris K. Visser and Kristy T. Harlan, individuals with full power of substitution, as my attorney-in-fact to act for me and in my name, place and stead, and on my behalf in connection with the matters set forth in Item 2 below.

2. Powers of Attorney-in-Fact. Each attorneyin-fact, as fiduciary, shall have the authority to sign all such U.S. Securities and Exchange Commission ("SEC") reports, forms and other filings, specifically including but not limited to Forms 3, 4, 5 and 144, as such attorney-in-fact deems necessary or desirable in connection with the satisfaction of my reporting obligations under the rules and regulations of the SEC.

3. Effectiveness. This power of attorney shall become effective upon the execution of this document.

4. Duration. This power of attorney shall remain in effect until revoked by me. This power of attorney shall not be affected by disability of the principal.

5. Revocation. This power of attorney may be revoked in writing at any time by my giving written notice to the attorney-in-fact. If this power of attorney has been recorded, the written notice of revocation shall also be recorded.

Date: November 21, 2014.

__Kalen Holmes___ Kalen Holmes

STATE OF Washington COUNTY OF Snohomish

SIGNED OR ATTESTED before me on 11/21/14.

_____Sharon D. Kamprath_____ Signature of Notary Public

_Sharon D. Kamprath_____ (SEAL) Typed Name of Notary Public Residing at:Lynnwood, WA My commission expires: _2/23/15_

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