FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
OMB Number:	3235-0104					
Estimated average burden						
hours per response:	0.5					

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* Kalen Holmes 2. Date of Event Requiring Statement (Month/Day/Year) 12/02/2014		nent	3. Issuer Name and Ticker or Trading Symbol Zumiez Inc [ZUMZ]								
(Last) 4001 204TH S (Street) LYNNWOOD (City)		(Middle) 98036 (Zip)				tionship of Reporting Perso (all applicable) Director Officer (give title below)	10% Owner		6. Inc	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	
	Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Securi	ty (Instr. 4)					int of Securities ially Owned (Instr. 4)	3. Owners Form: Dir or Indirec (Instr. 5)	ect (D)	4. Nat (Instr.		Beneficial Ownership
Common Stock					0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable at Expiration Date (Month/Day/Year) Date Expirat Exercisable Date		ate	3. Title and Amount of Securi Underlying Derivative Securit		ty (Instr. 4) Conve		rcise Form:	Ownership Form:	(Instr. 5)		
			Expiratio Date	n Title		Amount or Number of Shares	Secur	ative	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Chris K. Visser, Attorney-In-

Fact

** 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 5 (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.

- 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 attorney-in-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.
	en Holmes_ en Holmes		
STATE OF Washi COUNTY OF Snot	•)	

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_