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## 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 or Section 30(h) of the Investment Company Act of 1940

## OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person*       2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Reporting Person(s) to Issuer (Check all applicable)         Brown Troy R.       2. Issuer Name and Ticker or Trading Symbol       5. Relationship of Reporting Person(s) to Issuer (Check all applicable)         (Last)       (First)       (Middle)       3. Date of Earliest Transaction (Month/Day/Year)       5. Relationship of Reporting Person(s) to Issuer (Check all applicable)         4001 204TH STREET SW       3. Date of Earliest Transaction (Month/Day/Year)       6. Individual or Joint/Group Filing (Check Applicable)         (Street)       LYNNWOOD WA       98036       4. If Amendment, Date of Original Filed (Month/Day/Year)       6. Individual or Joint/Group Filing (Check Applicable)         (City)       (State)       (Zip)       (Zip)       Form filed by One Reporting Person			
(Last)       (First)       (Middle)         4001 204TH STREET SW       3. Date of Earliest Transaction (Month/Day/Year)       1. below)       below)       Ex. V.P. of E-commerce         (Street)       (Street)       4. If Amendment, Date of Original Filed (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 Person			(Check all applicable) Director 10% Owner Officer (aive title Other (appeit)
(Street) LYNNWOOD WA 98036 Form filed by One Reporting Person Form filed by More than One Reporting Person			below) below)
	LYNNWOOD WA 98036	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form filed by One Reporting Person Form filed by More than One Reporting

## 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.					Securities Beneficially	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)		(1130.1.4)
Common Stock	03/14/2014		F		326 <sup>(1)</sup>	D	\$25.06	16,371 <sup>(2)</sup>	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)				6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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. Shares withheld by Zumiez to pay taxes on restricted stock.

2. The share total includes 1,072 shares acquired through the Zumiez Inc. Employee Stock Purchase Plan.

Chris K.	Visser, A	<u>Attorney-in-</u>

Fact

03/18/2014

\*\* 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.