Edgar Filing: ALBERINI CARLOS - Form 4

ALDEDINI CADLOG

ALBERINI	CARLOS											
Form 4												
November 1	0, 2005											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
CURIVI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287		
Check th									Expires:	January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF										2005 average		
Section 16. SECURITIES									burden ho	•		
Form 4 o									response	•		
	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,											
obligation may cont				•	•	· ·		of 1935 or Section	on			
See Instru		30(h)) of the Inv	vestment	Compan	y Act	t of 19	40				
1(b).												
(D=:===================================)											
(Print or Type I	(esponses)											
				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to				
				Ivanie anu		ITaum	Ig	Issuer	i reporting i e			
	-	Symbol GUESS INC [GES]										
(1 +)									(Check all applicable)			
				3. Date of Earliest Transaction (Month/Day/Year)				XDirector10% Owner				
C/O GUESS	S? INC 1444	SOUTH		/08/2005				IO// Owner Officer (give title Other (specify				
C/O GUESS?, INC., 1444 SOUTH 11/08/2 ALAMEDA STREET				1012005				below) below) President and COO				
(Street) 4.]				I. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
• • •					Applicable Line)) by One Reporting Person						
LOSANGE	LES, CA 9002	71							More than One R			
LOS ANOL	LLS, CA 9002	21						Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction			3.	4. Securi			5. Amount of		7. Nature of		
-				on Date, if TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Instr. 3) any (Mo			/Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership		
								Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
				a		or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	× ·				
Common Stock	11/08/2005			S	5,600	D	\$ 31	10,949	D			
Common	11/08/2005			S	7,500	D	\$ 31	3,449	D			
Stock	1,00,2000			~	(1)	2	<i>4</i> 0 1	-,				

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

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 control number.

Edgar Filing: ALBERINI CARLOS - Form 4

 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. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own 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			
ALBERINI CARLOS							
C/O GUESS?, INC.	х		President				
1444 SOUTH ALAMEDA STREET	Λ		and COO				
LOS ANGELES, CA 90021							

Signatures

Carlos Alberini 11/10/2005

<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) The acquisition of these shares was under a tax conditioned plan and not required to be reported pursuant to Rule 16b-3(c)

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.