## Edgar Filing: SIGNET JEWELERS LTD - Form 4

SIGNET JEW Form 4 April 29, 201	VELERS LTD 5											
FORM	4		CECUD							PPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this if no long	er								Expires:	January 31, 2005		
subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHIP ( SECURITIES					Estimated a			
Section 16 Form 4 or					GHES				burden hou	•		
Form 5	Filed purs	suant to S	Section 16	6(a) of the	e Securiti	es Ex	cchang	ge Act of 1934,	response	0.5		
obligation may conti	$^{18}$ Section 17(a)	a) of the H	Public Ut	ility Hold	ing Com	pany	Act o	f 1935 or Sectio	n			
<i>See</i> Instruction 16(a) of the Fublic Outing Company Act of 1955 of Section 30(h) of the Investment Company Act of 1940 1(b).												
(Print or Type R	asponses)											
(Thit of Type K	esponses)											
1. Name and Address of Reporting Person _       2. Issuer         JENKINS MARK ANDREW       Symbol				ssuer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			SIGNET	ET JEWELERS LTD [SIG]				(Check all applicable)				
(Last)	(First) (M	liddle)	3. Date of	Earliest Tra	ansaction			(Check	ek un uppheuok			
				Ionth/Day/Year) I/27/2015				Director 10% Owner X_ Officer (give title Other (specify				
CLARENDON HOUSE, 2 04/27/2 CHURCH STREET				2//2013				below) below) Chief Corp Gov/Corp Secretary				
(Street) 4. If			4. If Amer	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
Filed(Me				ed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person				
HAMILTON	I, D0 HM11								More than One Re			
(City)	(State) (	Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	2A. Deer	med	3.	4. Securi			5. Amount of	6. Ownership			
Security (Instr. 3)	(Month/Day/Year)	Executio any	n Date, if	TransactionAcquired (A) or Code Disposed of (D)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(Instr. 5)			(Month/Day/Year)					Owned I	Indirect (I)	Ownership		
						Following Reported	(Instr. 4)	(Instr. 4)				
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common	04/27/2015			٨	777	٨	\$ 0	15 262	D			
Shares, par value \$0.18	04/27/2015			А	777	А	\$0	15,362	D			

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.

 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. Transactio Code (Instr. 8)	5. or/Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Addre	SS	Relationships							
	Director	10% Owner	Officer	Other					
JENKINS MARK ANDREV CLARENDON HOUSE 2 CHURCH STREET HAMILTON, D0 HM11	V		Chief Corp Gov/Corp Secretary						
Signatures									
Mark A. Jenkins	04/29/2015								
<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).

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.