

MICHAEL KORS HOLDINGS LTD

Reported by ROBINSON CATHY MARIE

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 06/04/15 for the Period Ending 06/02/15

Telephone 44 79 6437 8613

CIK 0001530721

Symbol KORS

SIC Code 3100 - Leather & Leather Products

Industry Apparel/Accessories

Sector Consumer Cyclical

Fiscal Year 03/28



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 *				2. Issu	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Robinson Cath	y Marie			Mich	ael Kor	s Hold	ing	s Ltd	[K	ORS	S]					
(Last) (First) (Middle)				3. Dat	3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner				
33 KINGSWAY					6/2/2015							Officer (give title below) Other (specify below) SVP, Global Ops				
	(Street)			4. If A	mendmen	t, Date (Orig	inal Fi	led (N	MM/DE	D/YYYY)	6. Individual o	r Joint/G1	roup Filing	g (Check Ap	plicable
LONDON, X0 WC2B 6UF (City) (State) (Zip)												_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Ta	ble I - No	n-Derivat	ive Securi	ities Acc	quir	ed, Di	spose	ed of,	or Bei	neficially Own	ed			
		2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acqu (A) or Disposed o (D) (Instr. 3, 4 and 5)			Follow		of Securities Beneficially Owned Reported Transaction(s) d 4)			7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Ilisu. 4)
Ordinary shares, no par value 6/				6/2/2015		F		2241 (1)	D	\$48.60		19993 (2)			D	
	Table II	- Deriva	tive Secur	ities Bene	eficially O	wned (e.g.	, puts,	calls	s, wai	rrants,	options, conve	ertible sec	curities)		
1. Title of Derivate Security (Instr. 3) 2. Conve or Exe Price of Derivat Securit		3. Trans. Date	Deemed	4. Trans. Code (Instr. 8)	rans. 5. Number of Derivative Securities			6. Date Exercisable and Expiration Date 7. Title and Securities U Derivative S (Instr. 3 and				nderlying Derivative Security (Instr. 5) (Instr. 5) Beneficia Owned		of derivative Securities Beneficially	Ownership Form of Derivative Ov	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	(A)		Date Exer	cisable I	Expirat Date	ion Tit	Amou Share	unt or Number of s		Reported Transaction (s) (Instr. 4)	(I) (Instr. 4)	

Explanation of Responses:

- (1) Represents shares withheld by the Company to cover tax withholding obligations upon the vesting of restricted shares.
- (2) Granted on June 2, 2014 pursuant to the Michael Kors Holdings Limited Omnibus Incentive Plan (the "Incentive Plan"). 25% of these share options are immediately exercisable. The remaining unvested share options will vest 25% each year on June 2, 2016, 2017 and 2018, respectively, subject to grantee's continued employment with the Company through the vesting date.

Reporting Owners

Depositing Overson Name / Address	Relationships								
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other				
Robinson Cathy Marie									
33 KINGSWAY				SVP, Global Ops					
LONDON, X0 WC2B 6UF				1 '					

Signatures

/s/ Krista A. McDonough, as Attorney-in-Fact for Cathy Marie Robinson

6/4/2015

Date

** Signature of Reporting Person

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 control number.