SEC Form 3

FORM 3

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

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INITIAL STATEMENT OF 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

	Address of Repo	0	2. Date of Event Requiring Staten (Month/Day/Year	nent	3. Issuer Name and Ticker or Trading Symbol <u>GUESS INC</u> [GES]				
(Last) C/O GUESS 1444 SOUT (Street) LOS ANGELES (City)	(First) I.Y., INC. H ALAMEDA CA (State)	(Middle) A STREET 90021 (Zip)	07/05/2006 		4. Relationship of Reporting Pers (Check all applicable) Director X Officer (give title below) SVP & CFO	10% Owner Other (specify below)	er 6. Ir ecify App	 5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by One Reporting Person 	
			Table I - Non	-Derivati	ive Securities Beneficially	y Owned			
1. Title of Security (Instr. 4)					Beneficially Owned (Instr. 4)	1		4. Nature of Indirect Beneficial Ownership (Instr. 5)	
No securities are beneficially owned.					0 ⁽¹⁾	D			
					e Securities Beneficially (nts, options, convertible		s)		
1. Title of Derivative Security (Instr. 4) 2. Date Exer Expiration D (Month/Day/			te	d 3. Title and Amount of Securi Underlying Derivative Securi 4)		4. Conversion or	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

1. Not applicable.

Remarks:

/s/ Dennis R. Secor

** 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.

07/05/2006