FORM 4

Check this box if no longer

Form 5 obligations may

Numitor Governance S.a r.1.

subject to Section 16. Form 4 or

continue. See Instruction 1(b).

1. Name and Address of Reporting Person*

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden

hours per response: 0.5

X 10% Owner

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

X Director

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

3. Date of Earliest Transaction (Month/Day/Year)

QUIKSILVER INC [ZQK]

| (Last) | (First) | (Middle) | Officer (give title Other (specify below) below) | | | | | | | | | | | |
|---------------------------------|----------------|--|---|--|----------|---------|---------------|------------------|-------------------------------------|---|---|--------------|--|--|
| C/O RHONE CAI | PITAL L.L.C. | | | | | | | | | 1011) | 50.0 | <i>'</i> | | |
| 630 5TH AVENU | JE, 27TH FLOOR | | 1160 | 5 | | | | + | | | (0) | | | |
| (Ct== at) | | | 4. If Amendment, | , Date of Original Filed | d (Month | ı/Day/` | Year) | | | al or Joint/Group F | iling (Check A | (pplicable | | |
| (Street) NEW YORK | NY | 10111 | | Line) Form filed by One Report | | | | | | | eporting Pers | rting Person | | |
| NEW TORK | INI | 10111 | | | | | | | Εo | orm filed by More t | | | | |
| (City) | (State) | (Zip) | · | | | | | | | erson | | | | |
| | | Table I - Nor | n-Derivative Securi | ities Acquired, Dispo | osed of, | , or Be | eneficially C |)wnec | Ł | | | | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction (A) or Disp (Instr. 3, 4 a) | | | posed | d Of (D) | Securities Beneficially Owned | 6. Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | Code | V | | (A) or (D) | Price | Following Reported Transaction(s) (Instr. 3 and 4) | or Indirect (I) (Instr. 4) | (Instr. 4) | | |
| Common Stock | | | 03/17/2015 | 03/17/2015 | A | | 15,000 (1) | A | \$0.00 | 31,286,111 | I | See footnote | | |
| Common Stock | | | 03/17/2015 | 03/17/2015 | A | | 15,000 (1) | A | \$0.00 | 31,301,111 | I | See footnote | | |
| | | | | <u>,I</u> | <u> </u> | | | | | _!! | 1 | | | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | | (0.9., | puto, oc | iiio, wai | · arit | s, options, co | iiveitible se | our ities, | | | | | |
|---|--|--|---|---|----------|--|--------|--|--------------------|---|----------------------------|-----|--|--|-------------------|
| 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. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Bei Ow (Ins |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option (right to buy) | \$1.7 | 03/17/2015 | 03/17/2015 | A | | 45,000 | | 03/17/2015 | 03/17/2022 | Common Stock | 45,000 | \$0 | 45,000 ⁽³⁾ | I | See Foo |
| Stock Option (right to buy) | \$1.7 | 03/17/2015 | 03/17/2015 | A | | 40,000 | | 03/17/2015 | 03/17/2022 | Common Stock | 40,000 | \$0 | 85,000 ⁽³⁾ | I | See Foo |
| | d Address of Fovernance S. a | Reporting Person* | | | | | | | | | | | | | |
| (Last) | (| First) | (Middle) | | | | | | | | | | | | |

| buy) | | | | |
|-------------|----------------|-------------------|----------|--|
| 1. Name and | d Address of F | Reporting Person* | | |
| Numitor Go | vernance S.a | <u>r. 1.</u> | | |
| (Last) | (| First) | (Middle) | |
| C/O RHONE | E CAPITAL L.I | L.C. | | |
| 630 5TH AV | ENUE, 27TH I | FLOOR | | |
| (Street) | | | | |
| NEW YORK | X N | NY | 10111 | |
| | | | | |

| 1. Name and Address of Reporting Person* | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| | | | | | | | | |
| | | | | | | | | |
| 630 5TH AVENUE, 27TH FLOOR | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| _ | | | | | | | | |

Explanation of Responses:

- 1. Vests in three equal annual installments.
- 2. Granted under the Issuer's 2000 Stock Incentive Plan to persons who are managing directors of Rhone Group L.L.C. and, at the time of the grant, directors of the Issuer. These persons each have an understanding with Rhone Group L.L.C. and Triton GP SPV LLC pursuant to which each holds his respective reported securities for the benefit of Romolo Holdings C.V., Triton SPV L.P., Triton Onshore SPV L.P., Triton Offshore SPV L.P. and Triton Coinvestment SPV L.P.
- 3. This Statement is being filed by Numitor Governance S.a.r.l. and Rhone Group L.L.C. (together, the "Reporting Persons"). The principal business address of each Reporting Person is 630 Fifth Ave, 27th Floor, New York, NY 10111, Rea Silvia GP C.V., as the general partner of Romolo Holdings C.V., may be deemed to be the beneficial owner of securities deemed to be beneficially owned by Romolo Holdings C.V. Numitor Governance S.a.r.l., as the managing general partner of Rea Silvia GP C.V., may be deemed to be the beneficial owner of securities that are deemed to be beneficially owned by Rea Silvia GP C.V. Rhone Group L.L.C., as the manager of Numitor Governance S.a.r.l., may be deemed to be the beneficial owner of securities that are deemed to be beneficially owned by Numitor Governance S.a.r.l. Each of the Reporting Persons disclaims beneficial ownership of the securities reported herein, except to the extent of its respective pecuniary interests.

Remarks:

This Form 4 and the Form 4 filed on the date hereof by Rhone Capital L.L.C., Rhone Holdings III L.L.C., Rhone Capital III L.P., Triton GP SPV LLC, Romolo Holdings C.V., Triton SPV L.P., Triton Onshore SPV L.P., Triton Offshore SPV L.P., Triton Coinvestment SPV L.P., and Rea Silvia GP C.V. relate to the same transaction. Due to the inability to include more than ten joint filers in an electronic report, Numitor Governance S.a r.l. and Rhone Group L.L.C., have filed this separate report. The complete list of joint filers for this transaction is as follows: Rhone Capital L.L.C., Rhone Holdings III L.L.C., Rhone Capital III L.P., Triton GP SPV L.P., Triton GP SPV L.P., Triton GP SPV L.P., Triton Coinvestment SPV L.P., Rea Silvia GP C.V., Numitor Governance S.a r.l. and Rhone Group L.L.C. Andrew Woodward Sweet and Michael Steven Langman have been designated by the Reporting Persons, pursuant to contractual rights held by Triton Onshore SPV L.P. and Triton Coinvestment SPV L.P., to serve on the Issuer's board of directors. Therefore, each of the Reporting Persons is a director of the Issuer for purposes of Section 16 of the Securities Exchange Act of 1934.

> /s/ M. Allison Steiner, Authorized Signatory Rhone Group L.L.C., its 03/18/2015 manager for NUMITOR GOVERNANCE S.A.R.L. /s/ M. Allison Steiner, CAO and General 03/18/2015

Counsel for RHONE GROUP L.L.C.

** 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.