

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

OMB APPR	OVAL
OMB Number:	3235-0104
Estimated average	e burden
hours per respons	e 0.5

#### 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

1. Name and Address of Reporting Per BLAIR KATHERINE J.	Statem	2. Date of Event Requiring Statement (Month/Day/Year) 05/15/2019			3. Issuer Name and Ticker or Trading Symbol SKECHERS USA INC [SKX]				
228 MANHATTAN BEACH B	ddle)			to Issuer	4. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  _X_Director _Officer (give titleOther (specify below)			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) MANHATTAN BEACH, CA 9	0266			X Director Officer (give				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person	
(City) (State) (Z	ip)	Table I - Non-Derivative Securities Beneficially Owned					Owned		
1.Title of Security (Instr. 4)		Bei		ly Owned	Form: Direct (D) or Indirect (I)	4. Natur (Instr. 5		ect Beneficial Ownership	
					(Instr. 5)				
No securities are beneficially or	wned	0			(Instr. 5)				
Reminder: Report on a separate line fo  Persons who r unless the form	r each class of se espond to the co n displays a cur	ecurities beneated to the control of crently valid	inform I OMB		D directly.	•	•		

## Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
BLAIR KATHERINE J. 228 MANHATTAN BEACH BLVD. MANHATTAN BEACH, CA 90266	X				

# **Signatures**

Katherine Blair	05/17/2019
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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.

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.