DECKERS OUTDOOR CORP Form 3 April 28, 2008 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> HILLEBRANDT THOMAS R	2. Date of Event Requiring Statement (Month/Day/Year) 04/28/2008	3. Issuer Name and Ticker or Trac DECKERS OUTDOOR CC	· ·	
(Last) (First) (Middle) 495-A S. FAIRVIEW AVENUE (Street)		4. Relationship of Reporting Person(s) to Issuer (Check all applicable)	5. If Amendment, Date Original Filed(Month/Day/Year)6. Individual or Joint/Group	
GOLETA, CA 93117 (City) (State) (Zip)	Tabla I	Director 10% Owner X Officer Other (give title below) (specify below) Chief Financial Officer	Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
1.Title of Security (Instr. 4)	2. Amount of Beneficially (Instr. 4)		ature of Indirect Beneficial ership	
information cont required to respo currently valid O	pond to the collection of ained in this form are no ond unless the form disp MB control number.	• SEC 1473 (7-02)	convertible securities)	

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and		3. Title and Amount of		4.	5.	6. Nature of Indirect
	Expiration Date		Securities Underlying		Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)		Derivative Security		or Exercise	Form of	(Instr. 5)
	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I)	

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
, o	Director	10% Owner	Officer	Other		
HILLEBRANDT THOMAS R 495-A S. FAIRVIEW AVENUE GOLETA, CA 93117	Â	Â	Chief Financial Officer	Â		
Signatures						
/s/Thomas R. 04/2 Hillebrandt	04/28/2008					
<u>**</u> Signature of Reporting	Date					

**Signature of Reporting Person

Explanation of Responses:

No securities are beneficially owned

* 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.