## Edgar Filing: EDWAB DAVID H - Form 4

EDWAB DA	AVID H											
Form 4												
May 03, 201	1											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL				
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287			
	Check this box								Expires:	January 31,		
	if no longer white ta STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								2003			
subject to STATEMENT OF CHARGES IN Section 16. SECUE					RITIES			Estimated average burden hours per				
Form 5	Form 5 Eiled encount to Section 16(a) of the Securities Enchance Act of 1024						Act of $1034$	response	0.5			
	Form 5 obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section											
may con	linue.			vestment	•	· ·			1			
See Instr 1(b).	uction	()			F	<i>,</i>		-				
(Print or Type ]	Responses)											
1. Name and A	Address of Reporting	Person <sup>*</sup>	2 Issuer	r Name <b>and</b>	l Ticker or '	Tradin	σ	5. Relationship of	Reporting Pers	on(s) to		
EDWAB DAVID H Symbol							-0	Issuer	uer			
Vitamin Shoppe, Inc. [VSI]							alt all applicable)					
(Last)	(First) (I	Middle)	3. Date of	f Earliest Ti	ransaction			(Check	c all applicable	)		
				th/Day/Year)				_X_ Director10% Owner				
			04/29/2	011				Officer (give titleOther (specify below)				
	(Street)		4 If Ama	endment, Da	ta Original			<i>,</i>	· · · · · ·	g(Choolr		
				nth/Day/Year	-			6. Individual or Joint/Group Filing(Check Applicable Line)				
					/			_X_ Form filed by O				
NORTH BE	ERGEN, NJ 0704	7						Form filed by M Person	ore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ties Acqu	ired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Date	2A. Deem		3.	4. Securit		_	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution		Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities	Ownership	Indirect		
(Instr. 3)		any						Beneficially	(D) or Ow			
		(Month/Da	ay/Year)					Owned Following		Ownership (Instr. 4)		
						(A)		Reported	(Instr. 4)	(		
						or		Transaction(s) (Instr. 3 and 4)				
~				Code V	Amount	(D)	Price	(Instr. 5 and 4)				
Common Stock	04/29/2011			М	13,958	А	\$ 6.82	15,693	D			
							¢					
Common Stock	04/29/2011			S	13,958	D	\$ 38.61	1,735	D			
STOCK							50.01					

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. Number of onDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 6.82	04/29/2011		М		13,958	<u>(1)</u>	11/23/2015	Common	13,958

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>							
	Director	10% Owner	Officer	Other			
EDWAB DAVID H 2101 91ST STREET NORTH BERGEN, NJ 07047	Х						
Signatures							
/s/ James M. Sander, attorney-in-fact		05/03/201	1				
<u>**</u> Signature of Reporting Person		Date					
Evaluation of Decrements							

## **Explanation of Responses:**

- \* 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).
- (1) Options vest in four equal installments beginning on November 23, 2005.

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.