Vitamin Shoppe, Inc. Form 4

April 05, 2016

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

0.5

January 31, Expires: 2005

**OMB APPROVAL** 

Estimated average burden hours per response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Common

Stock

04/04/2016

(Print or Type Responses)

1. Name and Address of Reporting Person * Buggeln Catherine Elizabeth  (Last) (First) (Middle)			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
				**	Inc. [VSI]				
				Earliest Tra	ansaction				
			(Month/Da	•		_X_ Director		% Owner	
C/O VITAMIN SHOPPE, INC., 300			04/04/20	)16		Officer (give title Other (specify below)			
HARMON N	MEADOW BLV	D.				below)	below)		
(Street)			4. If Amer	ndment, Dat	te Original	6. Individual or Joint/Group Filing(Check			
		Filed(Mon	th/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person				
SECAUCUS, NJ 07094						Form filed by More than One Reporting Person			
(City)	(State)	Table	e I - Non-D	erivative Securities Ac	quired, Disposed of, or Beneficially Owned				
1.Title of	2. Transaction Dat	e 2A. Dee	emed	3.	4. Securities	5. Amount of	6. Ownership	7. Nature of	
Security (Month/Day/Year) Execut		on Date, if	Transactio	onAcquired (A) or	Securities	Form: Direct	Indirect		
(Instr. 3)		any		Code	Disposed of (D)	Beneficially	(D) or	Beneficial	
		(Month	/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership	
						Following	(Instr. 4)	(Instr. 4)	
					(A)	Reported			
					or	Transaction(s)			
						(Inetr 3 and 1)			

Code V

M

(D)

Price

\$0

Amount

470

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Instr. 3 and 4)

D

3,204

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

#### Edgar Filing: Vitamin Shoppe, Inc. - Form 4

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)		6. Date Exercisable and Expiration Date (Month/Day/Year)		(Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	(1)	04/04/2016		M	470	(2)	(2)	Common Stock	470	\$ 0

## **Reporting Owners**

Relationships Reporting Owner Name / Address 10% Owner Officer Other Director

Buggeln Catherine Elizabeth C/O VITAMIN SHOPPE, INC. 300 HARMON MEADOW BLVD. SECAUCUS, NJ 07094



# **Signatures**

David M. Kastin, as Attorney-In-Fact

04/05/2016

\*\*Signature of Reporting Person

Date

# **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) Each restricted stock unit granted represents a right contingent on time vesting to receive one share of Common Stock.
- On July 2, 2015, the reporting person was granted 1,879 restricted stock units, vesting in four equal quarterly installments beginning on **(2)** October 2, 2015.

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.

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