Vitamin Shoppe, Inc. Form 4

January 05, 2016

### FORM 4

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

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 \*

**DERBY DEBORAH** Issuer Symbol Vitamin Shoppe, Inc. [VSI] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) X\_ Director 10% Owner Other (specify Officer (give title 300 HARMON MEADOW BLVD. 01/02/2016 below)

2. Issuer Name and Ticker or Trading

OHARMON MEADOW BLVD. 01/02/2016 — Officer (give title below) Other (specify below)

(Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line)

\_X\_Form filed by One Reporting Person

SECAUCUS, NJ 07094

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed 4. Securities 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) Code Disposed of (D) Beneficially (D) or Beneficial (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Indirect (I) Ownership (Instr. 4) Following (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Common

Common 01/02/2016 M 470 A \$ 0 3,803 D

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.

Person

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

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

Form filed by More than One Reporting

Estimated average

burden hours per

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

1. Title of	2.	3. Transaction Date		4.	5. Number			7. Title and Amount of			
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof		Expiration Date		Underlying Securities		Derivat	
Security	or Exercise		any	Code	Derivative	(Month/Day	(Month/Day/Year)		(Instr. 3 and 4)		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities	Securities					
	Derivative				Acquired						
	Security				(A) or						
					Disposed						
					of (D)						
					(Instr. 3, 4,						
					and 5)	,					
					and 5)						
				Code V	(A) (D)	Date	Expiration	Title	Amount		
						Exercisable	Date		or		
									Number		
									of		
									Shares		
									Shares		
Restricted											
Stock	(1)	01/02/2016		M	470	(2)	(2)	Common	470	\$ 0	
	111	01/02/2010		IVI	470	, 🖰	<u>(-)</u>	Stock	470	ş C	
Units											

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

DERBY DEBORAH
300 HARMON MEADOW BLVD. X
SECAUCUS, NJ 07094

#### **Signatures**

/s/ David M. Kastin, as Attorney-In-Fact

01/05/2016

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

#### **Remarks:**

**Exhibit List** 

#### Exhibit 24 - Power of Attorney

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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