### GNC HOLDINGS, INC. Form 3 July 01, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB ODDE ON

### 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> MORAN ROBERT F			<ul><li>2. Date of Event Requiring</li><li>Statement</li><li>(Month/Day/Year)</li></ul>	3. Issuer Name and Ticker or Trading Symbol GNC HOLDINGS, INC. [GNC]						
(Last)	(First)	(Middle)	06/25/2013	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)					
Â	(Street)			(Check all applicable) X_ Director 10% ( Officer Other (give title below) (specify below)	OwnerX_ Form filed by One Reporting PersonForm filed by More than One					
(City)	(State)	(Zip)	Table I - I	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Sec (Instr. 4)	urity		2. Amount o Beneficially (Instr. 4)		4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Reminder: Report on a separate line for each class of secur owned directly or indirectly.			each class of securities benefic	sec 1473 (7-02	))					
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										

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

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
MORAN ROBERT F	λv	Â	â	Â		
Â	АЛ	A	A	A		
Signatures						
Amanda J. Skov, by power of attorney	07/01/2013					
**Signature of Reporting Person	Date					

## **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.