### FRYDMAN JEAN W Form 3 August 03, 2012 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB 2025 OMB

### 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 Ac Person <u>*</u> FRYDMA		-	2. Date of Event Re Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol Vitamin Shoppe, Inc. [VSI]					
(Last)	(First)	(Middle)	08/01/2012		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
2101 91ST S	TREET						· · ·			
(Street) NORTH BERGEN, NJ 07047				(Check	(Check all applicable)		<ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting</li> <li>Person</li> <li>Form filed by More than One</li> <li>Reporting Person</li> </ul>			
(City)	(State)	(Zip)	Tab	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)			Bene	Beneficially Owned Ownership Ow		4. Nature of Ownership (Instr. 5)	f Indirect Beneficial			
Reminder: Repo owned directly o		ate line for ea	ch class of securities	beneficially S	EC 1473 (7-02)	)				
	inform requir	nation conta ed to respo	oond to the collec ained in this form nd unless the forr MB control numbe	are not m displays a						
T	able II - Der	ivative Secu	rities Beneficially O	wned (e.g., puts, calls,	warrants, opt	ions, conver	rtible securities)			
1. Title of Deriv (Instr. 4)	vative Securi	Expir	te Exercisable and ration Date <sup>(Day/Year)</sup>	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	f 4. Conversio or Exercis Price of		f (Instr. 5)			

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

# **Reporting Owners**

Reporting Owner Name / Addres		Relationships					
FoB o () ()		irector	10% Owner	Officer	Other		
FRYDMAN JEAN W 2101 91ST STREET NORTH BERGEN, NJÂ	07047	Â	Â	See Remarks	Â		
Signatures							
/s/ Jean Frydman	08/03/201	12					
<u>**</u> 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).

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#### **Remarks:**

## Vice President, General Counsel & Corporate Secretary

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.