## Edgar Filing: NUTRI SYSTEM INC /DE/ - Form 4

NUTRI SYS	STEM INC /DI	E/										
Form 4												
March 24, 20	015											
FORM	14 UNITE		SECUE	TTIES	A 1		<b>~TT</b> A <sup>•</sup>	NCEO	OMMISSION		PROVAL	
		DSIAIES				ND EAU D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287	
Check th					, -	2.0.20				Expires:	January 31,	
if no long subject to		EMENT O	F CHAN	GES IN BENEFICIAL OWN					NERSHIP OF	•	2005 Verage	
Section 1				SECU	SECURITIES					Estimated average burden hours per		
Form 4 o										response	0.5	
Form 5 obligatio		•						•	e Act of 1934,			
may cont				•		•	· ·		1935 or Section	1		
See Instruction 1(b).	uction	50(n)	of the In	vestme	nt (	Jompan	y Ac	ι 01 194	0			
1(0).												
(Print or Type I	Responses)											
		*										
MONAHAN MICHAEL P. Symbol NUTRI				r Name <b>and</b> Ticker or Trading					5. Relationship of Issuer	Reporting Pers	son(s) to	
				I SYSTEM INC /DE/ [NTRI]					(Check all applicable)			
				te of Earliest Transaction th/Day/Year) 0/2015					Director	100/-	Owner	
									Difficer (give			
			03/20/2	010					below) Chief F	below) Financial Office	⊃r	
	(Streat)		4 TC A	1 4	<b>Б</b> (	0	1					
				nendment, Date Original					6. Individual or Joint/Group Filing(Check Applicable Line)			
Filed(Mon				onth/Day/Year)					_X_ Form filed by One Reporting Person			
FORT WAS	SHINGTON, F	PA 19034							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non	ı-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I			3.		4. Securi			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Ye	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)						Securities Beneficially	Form: Direct (D) or	Indirect Beneficial		
(IIIsti. 5)		any (Month/Day/Year)							2	Indirect (I)		
									Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported Transaction(s)			
				Code	v	Amount	or	Price	(Instr. 3 and 4)			
Common							. ,	\$				
stock	03/20/2015			F		656 <u>(1)</u>	D	<sup>+</sup> 20.56	59,082	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.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
MONAHAN MICHAEL P. 600 OFFICE CENTER DRIVE FORT WASHINGTON, PA 19034				Chief Financial Officer					
Signatures									
/s/ Michael P. Monahan	03/24/	2015							
<u>**</u> 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) Withholding of common stock to cover tax liability.

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.