FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
nstruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Miller P. Michael																Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner							
(Last) (First) (Middle) C/O VERA BRADLEY, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/25/2016										X		er (give title			er (specify			
12420 STONEBRIDGE ROAD					4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	KE IN	. 4	16783													X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate) (Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Tran: Code) 8)			4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			and Securities Beneficia Owned Fo		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
											V Amou			(A) or (D)		Reported Transaction(s) (Instr. 3 and 4)		tion(s)			(Instr. 4)		
Common Shares			03/25/2016								4,302(5))	A	A \$0		68,015		D					
Common Shares																1,683,340		I		See Footnote ⁽¹⁾			
Common Shares															1,500,000		I		See Footnote ⁽²⁾				
Common Shares			03/25/2016					A			4,302(5)		A	\$0		2,200,658		I		See Footnote ⁽³⁾			
Common Shares															1,099,839		I		See Footnote ⁽⁴⁾				
		Та										sed of, onvertib					Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code (8)			6. Date Expira (Monti	tion I	Date /Ye		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4) Amount or Numbe of Title Shares		of s ng e (Instr.	De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)			

Explanation of Responses:

- 1. Shares reported in column 5 represent shares held by the Patricia R. Miller 2007 Family Trust. P. Michael Miller is the trustee of the Patricia R. Miller 2007 Family Trust.
- 2. Shares reported in column 5 represent shares held by the Miller Marital Trust. P. Michael Miller and Patricia R. Miller are husband and wife. Patricia R. Miller is the trustee of the Miller Marital Trust.
- 3. Shares reported in column 5 represent shares held by Patricia R. Miller. P. Michael Miller and Patricia R. Miller are husband and wife.
- 4. Shares reported in column 5 represent shares held by the Miller 2007 Dynasty Trust. P. Michael Miller is the trustee of the Miller 2007 Dynasty Trust.
- 5. Represents restricted stock units subject to vesting and forfeiture.

/s/ Anastacia S. Knapper, by power of attorney for P.

03/29/2016

Michael Miller ** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.