FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB AP | PROVAL |
|-------------------|----------|
| OMB Number: | 3235-028 |
| Estimated average | hurdon |

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Filed purcuant to Section 16(a) of the Securities Evolution Act of 1024

| msuuc | uon 1(b). | | | riiet | | | | | | estment (| | | | | 04 | | | 1- | | | |
|---|---|-----|---|---|---|--|--------|---|-------------------|--|----------|---|---|---|---------------------------|---|-------------------------|--|------------------------------------|--|--|
| Name and Address of Reporting Person* Packgoond Porham P | | | | 2. Issuer Name and Ticker or Trading Symbol Vera Bradley, Inc. [VRA] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
| Baekgaard Barbara B. | | | | | | | | | | | | | | | | X | Direct | or | X | 10% O | wner |
| (Last) (First) (Middle) 2208 PRODUCTION ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/21/2010 | | | | | | | | | | | Officer (give title below) | | | Other (sbelow) | specify | |
| | | | | | 4. If | Ame | ndmen | t, Date | of O | riginal F | iled (| (Month/D | ay/Ye | ar) | 6. 1 | ndivid | ual or | Joint/Group | Filing | (Check Ap | plicable |
| (Street) FORT W | AYNE II | V | 46808 | | | | | | | | | | | | Lin | X | | filed by One | | • | |
| (City) (State) (Zip) | | | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | |
| | | Tab | le I - Nor | า-Deriva | ative | Sec | curiti | es Ac | cqui | ired, D | isp | osed | of, o | r Ben | eficia | lly O | wne | t | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | ur) E | 2A. Deemed Execution Date, if any (Month/Day/Year | | •, | Transaction Dispo | | | curities Acquired (A) osed Of (D) (Instr. 3, 4 | | | 4 and Secu Bene Own | | es ally Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | Code | <i>,</i> | Amount | t (A) or (D) | | Price | Reporte Transa (Instr. 3 | | tion(s) | | | (Instr. 4) |
| | | 7 | able II - | Derivat (e.g., ρι | | | | | | | | | | | | / Ow | ned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deeme Execution if any (Month/Da | Date, T | Code (Inst | | | vative irities ired r osed) | Expi | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Pri Deriv Secu (Instr | ative rity | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow For Dire or I (I) (| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (0) | (5) | Date | e reisable | | xpiration | Title | O N O | umber | | | | | | |

Explanation of Responses:

(1)

Restricted

Stock Units

- 1. Converts into common stock on a one-for-one basis.
- 2. The restricted stock units were granted on October 21, 2010, under the Vera Bradley, Inc. 2010 Equity and Incentive Plan. The stock units vest and settle in common stock on the second anniversary of the grant date.

(2)

/s/ David R. Traylor, by Power of Attorney

100

Common

Stock

(2)

10/25/2010

100

** 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).

10/21/2010

** 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.

100