## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	.C. 20040

STATEMENT	OF (	CHANGES	IN RENE	FICΙΔΙ	OWNERS	ΗΙΡ
STATEMENT	OF (	SHANGES		FICIAL	OWNERS	ПІГ

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average bur	den									
1	hours por rosponso:	0.5									

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Ray Michael C.						2. Issuer Name <b>and</b> Ticker or Trading Symbol Vera Bradley, Inc. [ VRA ]											o of Reportii licable) tor	•	rson(s) to Is	
C/O VERA BRADLEY, INC.						3. Date of Earliest Transaction (Month/Day/Year) 10/27/2014										Office	er (give title v)		Other below	(specify )
12420 STONEBRIDGE ROAD  (Street) ROANOKE IN 46783						4. If Amendment, Date of Original Filed (Month/Day/Year) 12/15/2014									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(51		Zip)	2 Dorive	ntivo		ouritio	- Δο	auirod	Die	nosod o	f or	Bon	oficia	alla C	)n	. d			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				tion 2A. Deemed Execution Date,			quired, Disposed of, or Benef  3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)  Code V. Amount (A) or R			(A) or 3, 4 an	o) or 5. A Sec Ber Ow Rep		Amount of ecurities eneficially wned Following eported		: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common Shares						+			Code	v	Amount	(6	))	Price	Price Transaction(s) (Instr. 3 and 4)  9,696,465 <sup>(1)</sup> I				See footnote <sup>(2)</sup>	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
			Transaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Pri Deriv Secu (Instr	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Form Direct or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	ount nber ıres	ber					

## **Explanation of Responses:**

- 1. This amendment corrects the Form 4 filed December 15, 2014, which indicated that Michael C. Ray was no longer the beneficial owner of the 8,810,469 shares held by the Barbara B. Baekgaard 2009 Grantor Retained Annuity Trust and that he was no longer subject to Section 16. Mr. Ray continues to disclaim beneficial ownership of and pecuniary interest in the shares held by the Barbara B. Baekgaard 2009 Grantor Retained Annuity Trust.
- 2. The shares in column 5 represent shares beneficially owned by Michael C. Ray, including 885,996 shares held by the Michael Ray 2009 Grantor Retained Annuity Trust, of which his spouse serves as sole trustee, and 8,810,469 shares held by the Barbara B. Baekgaard 2009 Grantor Retained Annuity Trust. Mr. Ray disclaims beneficial ownership of and pecuniary interest in all of these shares.

/s/ Anastacia S. Knapper, attorney-in-fact for Michael C. 12/19/2014 <u>Ray</u>

\*\* 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.