FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
1	Estimated average I	nurden								

0.5

hours per response:

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

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1. Name and Address of Reporting Person* Ray Michael C.						2. Issuer Name and Ticker or Trading Symbol Vera Bradley, Inc. [VRA]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>ivay iviiciaci C.</u>															Direc	ctor		X 10% C	Owner	
(Last) (First) (Middle) C/O VERA BRADLEY, INC.					3. Date of Earliest Transaction (Month/Day/Year) 05/23/2014									Offic belov	er (give title w)		Other below	(specify)		
2208 PRODUCTION ROAD				4 16	4. If Amandment, Date of Original Filed (Manth/Day/Mass)								6. Individual or Joint/Group Filing (Check Applicable							
(Street) FORT WAYNE IN 46808					4. 11	Line														
(City) (State) (Zip)															1 010					
		Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Owne	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N					Execution Date,		ate,	3. Transaction Code (Instr. 8)					nd 5) Securit		ties cially Following	Forr (D)	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transa	action(s) . 3 and 4)			(111501. 4)	
Common Shares												9,6		696,465			See footnote ⁽¹⁾			
Common Shares 05/23/20				014	14		S		5,000(2)	D	\$26.	71 ⁽³⁾	^{'1(3)} 914,998		D					
		Та	ble II								osed of, convertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		if any	ion Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira (Month	tion D	Year)	7. Title Amoun Securit Underly Derivat Securit and 4)	t of ies ying ive y (Instr. 3 Amount or Number	Dei Sec (Ins	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	y Di	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	of Shares	.						

Explanation of Responses:

- 1. 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, of which he serves as co-trustee. Mr. Ray disclaims beneficial ownership of and pecuniary interest in all of these shares.
- 2. These shares were sold pursuant to a written plan dated March 24, 2014 as specified in Rule 10b5-1 of the Securities Exchange Act of 1934, as amended.
- 3. The price reported in column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$26.62 to \$26.80, inclusive. The reporting person undertakes to provide Vera Bradley, Inc., any security holder of Vera Bradley, Inc., or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in the footnote.

/s/ Anastacia S. Knapper, attorney-in-fact for Michael C. 05/28/2014 Ray

** 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.