Zoe's Kitchen, Inc. Form 4 April 14, 2016

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

COLLYNS SUSAN			Symbol Zoe's Kitchen, Inc. [ZOES]	Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(energian application)			
			(Month/Day/Year)	X Director 10% Owner			
C/O ZOES KITCHEN, 5760 STATE			04/12/2016	Officer (give title Other (spec			
HIGHWAY	121 #250			below)			
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Filed(Month/Day/Year)	Applicable Line)			
PLANO, TX	75024			_X_Form filed by One Reporting Person Form filed by More than One Reporting			

2. Issuer Name and Ticker or Trading

(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Reneficially Owner

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securities on Acquired (A) or Disposed of (D) (Instr. 3, 4 and (A) or (D))) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount (D)	Price	(IIIstr. 3 and 4)		
Common Stock	04/13/2016		M	482 A	(1)	12,704	D	

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

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

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3235-0287

January 31,

2005

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5. Relationship of Reporting Person(s) to

Estimated average

burden hours per

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on Derivative Securities Acquired (or Dispose (D) (Instr. 3, 4 and 5)	(A) ed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	04/12/2016		A	1,334		<u>(2)</u>	(2)	Common Stock	1,334
Restricted Stock Units	(1)	04/13/2016		M		482	(3)	(3)	Common Stock	482

Reporting Owners

Reporting Owner Name / Address	Relationships					
• 5	Director	10% Owner	Officer	Other		
COLLYNS SUSAN C/O ZOES KITCHEN 5760 STATE HIGHWAY 121 #250 PLANO, TX 75024	X					

Signatures

/s/ Michael Todd as Attorney-in-Fact for Sue
Collyns

**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) Each restricted stock unit ("RSU") converts into the right to receive one share of common stock upon payment of par value (\$0.01) per share.
- (2) The restricted stock units vest in three equal annual installments beginning on April 12, 2017. Each RSU was granted on April 12, 2016, and was issued pursuant to the Company's 2014 Omnibus Incentive Plan.
- The restricted stock units vest in three equal annual installments beginning on April 13, 2016. Each RSU was granted on April 13, 2015, and was issued pursuant to the Company's 2014 Omnibus Incentive Plan. This Form 4 reflects the vesting of these RSUs on April 13, 2016 as to 33.33% of the original RSU grant amount.

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.

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