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TOWN SPORTS INTERNATIONAL HOLDINGS INC

Form 4

November 03, 2014

FORM	1 4								_	PPROVAL	
	UNITED	STATES		RITIES All shington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check the if no long subject to Section 1 Form 4 o Form 5 obligation may cont	ger STATE! 6. or Filed pu ns Section 17	SECUR 6(a) of the cility Hold	Securition Com	ies E	xchang Act of	NERSHIP OF ge Act of 1934, f 1935 or Sectio	Expires: January 20 Estimated average burden hours per response				
See Instru 1(b).	uction	30(II)	of the m	vestment (Compan	y AC	i 01 194	+0			
(Print or Type I	Responses)										
Giardina Robert J Symbol TOWN				Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				NATIONA	AL HOL	DIN	GS	(Check all applicable) _X_ Director10% Owner			
(Last)	(First)	Earliest Transaction Oay/Year)				X Officer (give title Other (specify below) President and CEO					
5 PENN PL	AZA		10/31/20	014							
	(Street)			ndment, Dat th/Day/Year)	_			6. Individual or Jo Applicable Line) _X_ Form filed by 0	One Reporting Pe	erson	
NEW YOR	K, NY 10001							Person	More than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ities Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	e) Execution any	emed on Date, if 'Day/Year)	3. Transaction Code (Instr. 8)	on(A) or Di (D) (Instr. 3,	4 and (A) or	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock, par value \$0.001	10/31/2014			S	3,624 (1)	D	\$ 6.21 (2)	210,147	D		
Reminder: Rep	ort on a separate lin	e for each c	lass of secu	rities benefi	cially own	ed dir	ectly or	indirectly.			

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	OI	r		
						Date	Expiration	Title N	umber		
						Exercisable 1	Date	of			
				Code V	(A) (D)				hares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
.r. g	Director	10% Owner	Officer	Other			
Giardina Robert J 5 PENN PLAZA NEW YORK, NY 10001	X		President and CEO				

Signatures

/s/ David Kastin for Robert 11/03/2014 Giardina

**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).
- Represents shares of the Issuer's common stock sold to satisfy income tax withholding obligations in connection with the vesting of restricted stock.
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$6.09 to \$6.32, inclusive. The reporting person undertakes to provide to Town Sports International Holdings, Inc., any security holder of Town Sports International Holdings, 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 range set forth in this footnote.

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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