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Matthews D Form 4									
June 24, 200	09								
FORM			GEGU	DITIEC				т. Т	PPROVAL
Check th	UNITED	STATES		RITIES . ashingtor			E COMMISSION	NOMB Number:	3235-0287
if no lon	ider				Expires:	January 31, 2005			
subject t Section Form 4 o	SIAIEN 16.	F CHA	NGES IN SECU	Estimated burden hou response	average urs per				
Form 5 obligation may con <i>See</i> Instru- 1(b).	ons Section 17(a) of the	Public U	Jtility Ho	lding Co		nge Act of 1934, t of 1935 or Sectio 1940		
(Print or Type	Responses)								
1. Name and Address of Reporting Person <u>*</u> Matthews David Allen			2. Issuer Name and Ticker or Trading Symbol UNITED NATURAL FOODS INC				5. Relationship of Reporting Person(s) to Issuer		
		[UNFI		JKAL IC		(Check all applicable)			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			Director 10% Owner X Officer (give title Other (specify			
C/O UNITI INC., 260 I	OODS,	06/22/2000					below) nt, Eastern Region		
DAVANUT	4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
DAYVILL	E, CT 06241						Person		
(City)	(State)	(Zip)	Tal	ble I - Non-			Acquired, Disposed of		lly Owned
× /		Execution Date, if any		Code	. 4. Securities YransactionAcquired (A) or Code Disposed of (D) Instr. 8) (Instr. 3, 4 and 5) (A)		Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code V	Amount	or (D) Price	(Instr. 3 and 4)		
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	eficially ow	ned directly	or indirectly.		
					Perso infor requi	ons who re mation con red to resp ays a curre	spond to the colle tained in this form ond unless the foi ntly valid OMB co	are not m	SEC 1474 (9-02)
	Tab					sposed of, or convertible	• Beneficially Owned securities)	l	

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Number	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction of Derivative	Expiration Date	Underlying Securities I

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8	()	Securitie Acquire (A) or Dispose (D) (Instr. 3 and 5)	d d of	(Month/Day/Year)		(Instr. 3 and 4)	
				Code Y	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Unit	<u>(4)</u>	06/22/2009		А		9,000		<u>(1)</u>	(1)	Common Stock	9,000
Employee Stock Option (right to buy)	\$ 25.14	06/22/2009		А		6,500		(2)	06/22/2019	Common Stock	6,500

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Matthews David Allen C/O UNITED NATURAL FOODS, INC. 260 LAKE ROAD DAYVILLE, CT 06241			President, Eastern Region				
Signatures							
Mark E. Shamber (Power of Attorney, in fact)	06/24/	06/24/2009					

<u>**</u>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) The restricted stock units vest in four equal annual installments beginning on the first anniversary of the date of grant.
- (2) The stock option vests and becomes exercisable in four equal annual installments beginning on the first anniversary of the date of grant.
- (3) United Natural Foods, Inc.'s closing price on the NASDAQ National Market on June 22, 2009.
- (4) Each restricted stock unit represents the right to receive one share of United Natural Foods, Inc. common stock upon vesting in accordance with the terms of Mr. Matthews' restricted unit award agreement.

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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