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SHREIBER	GERAL	D B										
Form 4 April 30, 201	0											
FORM										OMB AF	PROVAL	
	U	NITED S	STATES		ITIES A hington,			IGE C	OMMISSION	OMB Number:	3235-0287	
Check this box			vv as	inington,	D.C. 200	(F)		Expires:	January 31,			
if no longer subject to Section 16. Form 4 or Form 5 Filed pursuant to Section 16.				SECUR	ITIES				Estimated average burden hours per response (
obligatior may conti <i>See</i> Instru 1(b).	inue. Sec	-) of the l	Public Ut		ing Com	pany	Act of	1935 or Section			
(Print or Type R	(esponses))										
1. Name and A SHREIBER			erson <u>*</u>	Symbol	Name and			-	5. Relationship of I Issuer	Reporting Pers	on(s) to	
(Last)	(First) (M	iddle)	J&J SNACK FOODS CORP [JJSF] 3. Date of Earliest Transaction (Check all app						all applicable	l applicable)	
6000 CENT		· · ·	,	(Month/Day/Year) X_ Director X_ 10% Own 04/22/2010 X_ Officer (give title below) Other (spe below) President and CEO								
PENNSAU	(Stree				ndment, Dat th/Day/Year)	-			6. Individual or Joi Applicable Line) _X_ Form filed by Oi Form filed by Mo	ne Reporting Per	son	
(City)	(State		Zip)						Person		_	
			-					_	ired, Disposed of,		-	
1.Title of Security (Instr. 3)		action Date Day/Year)	Execution any		Code	4. Securiti on(A) or Dis (Instr. 3, 4	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common					Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock, no par value	04/22/2	2010			G	277	D	<u>(1)</u>	3,740,522	D		
Commom Stock, no par value	04/30/2	2010			М	50,000	А	\$ 7.969	3,790,522	D		
Common Stock, no par value	04/30/2	2010			D	8,273	D	\$ 48.16	3,782,249	D		
Common Stock, no									189,990 <u>(2)</u>	D		

Reporting Owners

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par value

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

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 control number.

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. T	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amou		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		· · ·		Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					. ,						(IIISU
					(Instr. 3,						
					4, and 5)						
									Amount		
						Data	F		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SHREIBER GERALD B 6000 CENTRAL HIGHWAY PENNSAUKEN, NJ 08109	Х	Х	President and CEO					
Signatures								

Signatures

Gerald B.	04/30/2010			
Shreiber	04/30/2010			
<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) No \$ disclosed since this is a gift.
- (2) Owned by the Gerald B Shreiber Foundation. Beneficial ownership is disclaimed.

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.