#### MAGUIRE CATHERINE T

Check this box if

no longer subject

to Section 16.

5 obligations

may continue.

Form 4 or Form

Form 5

March 14, 2013

## FORM 5

**OMB APPROVAL** 

**OMB** 3235-0362 Number:

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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

Reported Form 4

30(h) of the Investment Company Act of 1940

Transactions Reported

1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer MAGUIRE CATHERINE T Symbol MEDIFAST INC [MED] (Check all applicable) (Last) (First) (Middle) 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) \_X\_ Director 10% Owner Officer (give title Other (specify 12/31/2012 below) below) C/O MEDIFAST, INC., 11445 CRONHILL DR. (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line)

#### OWINGS MILLS. MDÂ 21117

(State)

(Zip)

(City)

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

							, <u>-</u>	,	•
1.Title of Security (Instr. 3)		Transaction Date 2A. Deemed 3. 4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)  (A) or Disposed of (Instr. 8)  (A) or Amount (D) P.		d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	06/20/2011	Â	<b>A</b> 4 1	1,002 (1)	A	\$ 22.4	9,785	D	Â
Common Stock	03/31/2012	Â	A4	1,144	A	\$ 17.46	10,929	D	Â

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 I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

**SEC 2270** (9-02)

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

Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if	4. Transaction	5. Number	6. Date Exerc Expiration Da	ate	7. Title Amou	nt of	8. Price of Derivative
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		i ear)	Under Securi (Instr.	, ,	Security (Instr. 5)
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
• 5	Director	10% Owner	Officer	Other			
MAGUIRE CATHERINE T							
C/O MEDIFAST, INC.	â v	Â	â	â			
11445 CRONHILL DR.	АЛ	А	A	A			
OWINGS MILLS, MD 21117							

## **Signatures**

/s/ Catherine T.
Maguire

\*\*Signature of Reporting

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) This transaction was initially reported on a Form 4 filed by the reporting person on June 22,2011 and is being amended to correct the amount of shares acquired from 1,036 to 1,002.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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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