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DAVITA HEALTHCARE PARTNERS INC.

Form 4 May 13, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

3235-0287

Expires:

January 31, 2005

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SECURITIES

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).

Stock

(Print or Type	Responses)										
JIGANTI JEANINE MARIE S:								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O DAVI PARTNER STREET	3. Date of Earliest Transaction (Month/Day/Year) 05/11/2015					Director 10% Owner Officer (give title Other (specify below)					
				ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
DENVER,	CO 80202					Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 3, 4 and 5) ear) (Instr. 8) (A) or				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)		
Common Stock	05/11/2015			M M	Amount 4,687	(D)	Price \$ 48.68	8,213	D		
Common Stock	05/11/2015			F	2,777	D	\$ 82.17	5,436	D		
Common Stock	05/11/2015			S	1,910	D	\$ 81.9692	3,526	D		
Common	05/11/2015			S	571	D	\$	2,955	D		

81.8768

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(2)

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

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SEC 1474

(9-02)

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

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. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amor or Nur of Shar
Stock Appreciation	\$ 48.68	05/11/2015		M	4,687	07/09/2013(3)	07/09/2017	Common Stock	4,0

Reporting Owners

Reporting Owner Name / Address	Relationships					
18	Director	10% Owner	Officer	Other		
JIGANTI JEANINE MARIE C/O DAVITA HEALTHCARE PARTNERS INC. 2000 16TH STREET DENVER, CO 80202			Chief Compliance Officer			

Signatures

Rights

/s/ Arturo Sida,
Attorney-in-Fact

**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 the weighted average sale price of \$81.9692. The range of prices for the sale of these shares was \$81.945 - \$81.995, rounded (1) to the nearest thousandths. The reporting person undertakes to provide upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate price.

Reporting Owners 2

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- Represents the weighted average sale price of \$81.8768. The range of prices for the sale of these shares was \$81.871 \$81.882, rounded to the nearest thousandths. The reporting person undertakes to provide upon request by the Commission staff, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate price.
- The Stock Appreciation Rights were granted to the Reporting Person on 7/9/2012, pursuant to the DaVita HealthCare Partners Inc. 2011 (3) Incentive Award Plan, as amended and restated; 25% vested on 7/9/2013 (one-year fron the grant date), and the remaining 75% vests quarterly over the remaining three years from the grant date.

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.