TENET HEALTHCARE CORP

Form 4 July 08, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB 3235-0287 Number:

Expires:

OMB APPROVAL

Washington, D.C. 20549

January 31,

if no longer subject to Section 16. Form 4 or

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

2005 Estimated average burden hours per response... 0.5

Form 5 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).

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

(Street)

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Bush John Ellis

Symbol

(Check all applicable)

TENET HEALTHCARE CORP

[THC]

(Last)

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

(Instr. 8)

X_ Director 10% Owner Officer (give title Other (specify below)

1445 ROSS AVENUE, SUITE 1400

07/03/2013

4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

Applicable Line) _X_ Form filed by One Reporting Person

DALLAS, TX 75202

Person

Form filed by More than One Reporting

Issuer

(City) (State) (Zip)

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

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed

(Month/Day/Year) Execution Date, if

(Month/Day/Year)

4. Securities 3. TransactionAcquired (A) or Code Disposed of (D)

(Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect Beneficial (D) or Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

Reported Transaction(s)

or (Instr. 3 and 4) Code V Amount (D) Price

> 42,292 D

Common Stock

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

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

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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. Transactic Code (Instr. 8)	5. Number Deposition of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	Expiration E (Month/Day	ate	d 7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivativ Security (Instr. 5)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Units (1)	(2)	07/03/2013		A	699	(2)	(2)	Common Stock	699	\$ 46.1

Reporting Owners

Reporting Owner Name / Address	Relationships						
• 0	Director	10% Owner	Officer	Other			
Bush John Ellis 1445 ROSS AVENUE SUITE 1400 DALLAS, TX 75202	X						

Signatures

/s/ Jeffrey S. McFall, Attorney-in-Fact for John Ellis Bush

07/08/2013

**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).
- These Stock Units were credited under the Company's Deferred Compensation Plan (DCP) in accordance with the reporting person's election to defer all or part of quarterly cash director fees into Stock Units under the DCP. The Stock Units were credited to the reporting person's DCP account on July 3, 2013 using, pursuant to the terms of the DCP, the closing price of the Company's common stock on the last trading day of the most recently ended calendar quarter.
- These Stock Units are settled in shares of the Company's common stock in accordance with the DCP. The conversion rate is one share of common stock for each Stock Unit.

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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