THIRY KENT J

Form 4

December 06, 2012

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

January 31, Expires: 2005

**OMB APPROVAL** 

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if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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 may continue.

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

1. Name and THIRY K	2. Issuer Name and Ticker or Trading Symbol DAVITA HEALTHCARE PARTNERS INC. [DVA]				5	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)					
(Last) (First) (Middle)  C/O DAVITA HEALTHCARE PARTNERS INC., 2000 16TH STREET			3. Date of Earliest Transaction (Month/Day/Year) 12/04/2012				$\equiv$	_X Director 10% Owner Symbol Owner Other (specify below) Co-Chairman & CEO			
DENVER.	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				Ap _X —	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Ta	ble I - Non	ı-Derivative	Secur		ed, Disposed of, o	r Beneficially	/ Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3.	4. Securities or Disposed of (Instr. 3, 4	es Acq of (D)	uired (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	12/04/2012			M	220,000	A	\$ 46.26	424,427	D		
Common Stock	12/04/2012			F	95,516	D	\$ 106.55	328,911	D		
Common Stock	12/04/2012			D	124,484	D	\$ 106.0827	204,427	D		

(1)

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. Transaction Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and An Underlying Sec (Instr. 3 and 4)
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title N
Stock Appreciation Right	\$ 46.26	12/04/2012		M	220,000	03/02/2010(2)	03/02/2014	Common Stock

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

THIRY KENT J C/O DAVITA HEALTHCARE PARTNERS INC. 2000 16TH STREET DENVER, CO 80202

X

Co-Chairman & CEO

## **Signatures**

/s/ Kim M. Rivera Attorney-in-Fact

12/06/2012

Date

\*\*Signature of Reporting Person

### **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 range of prices for the sale of these shares was \$106.00 \$106.37. The filer undertakes to provide staff, the issuer or a security holder full information regarding the number of shares sold at each separate price.
- Stock Appreciation Right, pursuant to the DaVita Inc. 2002 Equity Compensation Plan, (as amended and restated, the "DaVita Inc. 2011 (2) Incentive Award Plan," effective June 6, 2011), which vested 25% on the first anniversary of the grant date, 8.33% on the 20th month following the grant date, and 8.33% every four months thereafter.

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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