DAVITA HEALTHCARE PARTNERS INC.

Form 4 May 11, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

3235-0287

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OMB APPROVAL

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obligations

Check this box

SECURITIES 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. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * **Kogod Dennis**

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

below)

DAVITA HEALTHCARE PARTNERS INC. [DVA]

(Check all applicable)

(First) (Middle) 3. Date of Earliest Transaction

Director 10% Owner X_ Officer (give title _ Other (specify

C/O DAVITA HEALTHCARE

(Month/Day/Year) 05/10/2016

Pres, HCP & CEO, DVA Int.

PARTNERS INC., 2000 16TH STREET

(Street)

05/10/2016

05/10/2016

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

146,466

61,202

58.94

D

D

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

DENVER, CO 80202

Stock

(City)	(State)	(Zip) Tal	ble I - Non	-Derivative	Secur	ities Acqu	uired, Disposed	of, or Benefic	ially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securitie owr Disposed (Instr. 3, 4 a	d of (D))	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	05/10/2016		M	56,250	A	\$ 55.34	92,716	D	
Common Stock	05/10/2016		F	40,938	D	\$ 76.04	51,778	D	
Common Stock	05/10/2016		S	15,312	D	\$ 76.25	36,466	D	
Common	05/10/2016		M	110,000	٨	\$	146 466	D	

110,000

85,264

D

M

F

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Common Stock					\$ 76.04			
Common Stock	05/10/2016	S	24,736	D	\$ 76.25	36,466	D	
Common Stock						84,350	I	By The 2005 Dennis Kogod and Gabrielle Cioffi-Kogod

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

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SEC 1474

(9-02)

Rev Trust

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 of TransactionDerivative 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 An Underlying Se (Instr. 3 and 4
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title
Stock Appreciation Rights	\$ 55.34	05/10/2016		M	56,250	04/01/2015(1)	12/18/2017	Common Stock
Stock Appreciation Rights	\$ 58.94	05/10/2016		M	110,000	03/19/2016(2)	03/19/2018	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		

Kogod Dennis C/O DAVITA HEALTHCARE PARTNERS INC. 2000 16TH STREET DENVER, CO 80202

Pres, HCP & CEO, DVA Int.

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Signatures

/s/ Arturo Sida, Attorney-in-Fact

05/11/2016

**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) The Stock Appreciation Rights were granted on 12/18/2012. 50% vested on 4/1/2015 and the remaining 50% vested on 4/1/2016.
- (2) The Stock Appreciation Rights were granted on 3/19/2013. 50% vested on 3/19/2016 and the remaining 50% will vest on 3/19/2017.

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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