

Edgar Filing: AMERIVEST PROPERTIES INC - Form 4

AMERIVEST PROPERTIES INC
 Form 4
 October 03, 2002

 FORM 4

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)
 (Print or Type Responses)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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. Name and Address of Reporting Person*			2. Issuer Name AND Ticker or Trading Symbol	6. Relationship
Atkins	William	T.	AmeriVest Properties, Inc. (AMV)	X Director
(Last)	(First)	(Middle)	3. IRS or Social Security Number of Reporting Person, if an entity (Voluntary)	X Officer
1780 South Bellaire Street, Suite 515			9/5/02	---
(Street)			N/A	---
Denver	Colorado	80222	5. If Amendment, Date of Original (Month/Day/Year)	7. Individual (Check appropriate Form) X Form
(City)	(State)	(Zip)		---

TABLE I - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFIT

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date (if any) (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned (Instr. 3)
			Code V	Amount (A) or Price (D)	
Common Stock	9/5/02		P	52,893 A \$6.05	1,580,28,

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Explanation of Responses:

(a) Common stock owned by entities in which reporting person has an indirect pecuniary interest.
beneficial ownership over an aggregate of 1,286,987 shares of common stock.

/s/ DEBORAH J

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

Deborah J
Attorney-

* 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) .

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.