Edgar Filing: TENET HEALTHCARE CORP - Form 4

TENET HEA Form 4 July 05, 2006	LTHCARE COF	ЗР									
FORM	Δ								PPROVAL		
Washington, D.C. 20									3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				GES IN B SECURI		burden hou	Estimated average burden hours per				
Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed purs s Section 17(a	a) of the P	ublic Uti	lity Holdi	ing Com		ge Act of 1934, f 1935 or Sectic 40	response	0.5		
(Print or Type R	esponses)										
GAINES BRENDA J Symbol TENET			Name and HEALTH			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) 13737 NOEI		[THC] (Middle) 3. Date of 2 (Month/Da 06/30/20			-			_X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street)			dment, Date Original h/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person				
DALLAS, T	X 75240						Form filed by I Person	More than One Re	porting		
(City)	(State) (Zip)	Table	I - Non-De	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executior any	n Date, if	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock				Code V	Amount	(D) Price	(Instr. 3 and 4) 385	D			
Damindar Dano	rt on a senarate line	for each ala	es of secur	itias banafic	ially owne	d directly or	indiractly				

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

Persons who respond to the collection of information contained in this form are not 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)

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. Transacti Code (Instr. 8)	5. Numb or of Deriv Securitic Acquire (A) or Dispose (D) (Instr. 3. and 5)	rative es d d of	6. Date Exercisable and Expiration Date (Month/Day/Year)				8. Pric Deriva Securi (Instr.
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Units	<u>(1)</u>	06/30/2006		А	4,090		(2)	(2)	Common Stock	4,090	\$ 6.
2005 March Director Stock Units (3)	\$ 0 <u>(4)</u>						<u>(4)</u>	(4)	Common Stock	22,550	
2005 May Director Stock Units (3)	\$ 0						(4)	(4)	Common Stock	10,833	
2006 May Director Stock Units (3)	\$ 0 <u>(4)</u>						(4)	(4)	Common Stock	17,264	

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Reporting Owners

Reporting Owner Name / Addre	SS	Relationships						
	Director	10% Owner	Officer	Other				
GAINES BRENDA J 13737 NOEL ROAD DALLAS, TX 75240	Х							
Signatures								
/s/ Gaines, Brenda J.	07/05/2006							
<u>**</u> 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).

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- (1) These Stock Units were accrued under the Company's Deferred Compensation Plan.
- (2) These Stock Units are settled in shares of the Company's common stock upon termination of service.
- (3) These Stock Units were awarded under the Company's Stock Incentive Plan.
- (4) These Stock Units vest ratably on each of the first, second and third anniversaries of the date of grant or become fully vested upon termination of service, whichever occurs first, and are settled in shares of the Company's common stock only upon termination of service.

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.