#### TENET HEALTHCARE CORP

Form 4 April 03, 2007

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

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**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or

Check this box

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 \* **UNRUH JAMES A** 

(First)

(Street)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

TENET HEALTHCARE CORP

(Check all applicable)

[THC]

(Last)

(Middle)

3. Date of Earliest Transaction

4. If Amendment, Date Original

X\_ Director 10% Owner Officer (give title Other (specify

(Month/Day/Year)

03/31/2007

6. Individual or Joint/Group Filing(Check

Applicable Line)

below)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

Person

DALLAS, TX 75240

13737 NOEL ROAD

(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)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following

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

(Instr. 4)

(A) or

Reported Transaction(s)

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

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)

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

4. Transactionof Code

5. Number 6. Date Exercisable and **Expiration Date** Derivative (Month/Day/Year)

7. Title and Amount of 8. I **Underlying Securities** (Instr. 3 and 4)

Dei

Sec

## Edgar Filing: TENET HEALTHCARE CORP - Form 4

| (Instr. 3)  | Price of<br>Derivative<br>Security |            | (Month/Day/Year) | (Instr. 8) | Securit<br>Acquire<br>(A) or<br>Dispose<br>of (D)<br>(Instr. 3<br>and 5) | ed<br>ed |                     |                    |                 |                                     | (In |
|---|------------------------------------|------------|------------------|------------|--|----------|---------------------|--------------------|-----------------|-------------------------------------|-----|
|   |                                    |            |                  | Code V     | (A)  | (D)      | Date<br>Exercisable | Expiration<br>Date | Title           | Amount<br>or<br>Number<br>of Shares |     |
| Stock<br>Units                                    | <u>(1)</u>                         | 03/31/2007 |                  | A          | 594  |          | (2)                 | (2)                | Common<br>Stock | 594                                 | S   |
| June Director Option (Right to Buy)               | \$ 12.64                           |            |                  |            |  |          | 06/24/2004          | 06/24/2014         | Common<br>Stock | 41,139                              |     |
| 2004<br>October<br>Director<br>Stock<br>Units (3) | \$ 0 (4)                           |            |                  |            |  |          | <u>(4)</u>          | <u>(4)</u>         | Common<br>Stock | 12,195                              |     |
| 2005<br>May<br>Director<br>Stock<br>Units (3)     | \$ 0                               |            |                  |            |  |          | <u>(4)</u>          | <u>(4)</u>         | Common<br>Stock | 10,833                              |     |
| 2006<br>May<br>Director<br>Stock<br>Units (3)     | \$ 0 (4)                           |            |                  |            |  |          | <u>(4)</u>          | <u>(4)</u>         | Common<br>Stock | 17,264                              |     |

# **Reporting Owners**

| Reporting Owner Name / Address                       | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
| · · · · · · · · · · · · · · · · · · ·                | Director      | 10% Owner | Officer | Other |  |  |  |
| UNRUH JAMES A<br>13737 NOEL ROAD<br>DALLAS, TX 75240 | X             |           |         |       |  |  |  |
| Signatures   |               |           |         |       |  |  |  |

/s/ Unruh, James
A.

\*\*Signature of Date

Reporting Person

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## **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) 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.