BIERMAN JAMES L

Form 4 May 08, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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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 See Instruction

1(b).

Stock (1)

(Print or Type Responses)

1. Name and Address of Reporting Person * BIERMAN JAMES L			2. Issuer Name and Ticker or Trading Symbol TENET HEALTHCARE CORP [THC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 1445 ROSS A	(First) (Mi	iddle) E 1400	3. Date of Earliest Transaction (Month/Day/Year) 05/04/2018			_X_ Director Officer (giv below)		6 Owner er (specify			
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
DALLAS, TX 75202							Form filed by More than One Reporting Person				
(City)	(State) (Z	Zip)	Table	I - Non-De	erivative S	ecuri	ties Ac	quired, Disposed (of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securion Acquired Disposed (Instr. 3, Amount 7,439	(A) o 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)	
Stock (1)	05/04/2018			A	(1)	A	\$0	20,286	D		

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)

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						•	Expiration		Number		
							Date	11110	of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
BIERMAN JAMES L							
1445 ROSS AVENUE	X						
SUITE 1400	Λ						
DALLAS, TX 75202							

Signatures

Anthony L. Shoemaker, as Attorney-in-Fact for James L. Bierman

05/08/2018

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).

Represents restricted stock units granted under the Company's Stock Incentive Plan. Each restricted stock unit is the economic equivalent of one share of the Company's common stock. All of these restricted stock units vested immediately on the grant date and will be settled in shares of common stock on the third anniversary of the date of grant (unless deferred settlement has been elected).

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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