Edgar Filing: BUNKER JONATHON W - Form 4

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Form 4	5 2004										
November (
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMMISSION	OMB APPROVAL			
	Washington, D.C. 20549						51011011551010	OMB Number:	3235-0287		
Check tl if no lon subject t Section Form 4 d	ger STATEN 16.	MENT O	F CHAI	Expires:January 31Estimated averageburden hours perresponse0.5							
Form 5 obligations may continue.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 19401(b).30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> BUNKER JONATHON W			2. Issuer Name and Ticker or Trading Symbol SIERRA HEALTH SERVICES INC [SIE]				0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			3. Date of Earliest Transaction					Director 10% Owner X Officer (give title Other (specify below) below) Sr. V.P., HMO & Ins. Ops.			
Fil				iled(Month/Day/Year) A				 5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
LAS VEGA	AS, NV 89128						:	Person			
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactic Code (Instr. 8)	4. Securiti our Dispose (Instr. 3, 4	ed of (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	11/03/2004			Code V I	Amount 1,732	(D) D	Price \$ 49.5498	9 000 27	Ι	By 401(k) Plan	
Common Stock	11/04/2004			М	15,000	А	\$8	58,128.78	D		
Common Stock	11/04/2004			S	15,000	D	\$ 49.75	43,128.78 <u>(1)</u>	D		

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

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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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	vative Expiration Date rities (Month/Day/Year) hired (A) isposed of r. 3, 4,		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy) (2)	\$ 8	11/04/2004		М	15,000	10/13/2000 <u>(3)</u>	10/12/2005	Common Stock	15,0

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
BUNKER JONATHON W 2724 N. TENAYA WAY LAS VEGAS, NV 89128			Sr. V.P., HMO & Ins. Ops.				
Signatures							
Jonathon Bunker/Jayne Primaky POA		11/05/200)4				
**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) Includes 557 shares acquired in June 2004 under the Sierra Employee Stock Purchase Plan.
- (2) Exercise of options granted in consideration for services under the Company's 1995 Long-Term Incentive Plan, which meets the requirements of, and which transactions are exempted by, Rule 16b-3 and Rule 16b-6(b).
- (3) Exercisable as to 20% on each of 10/13/00, 10/13/01, 10/13/02, 10/13/03 and 10/13/04.

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.