Edgar Filing: BERG CHARLES - Form 4

DEDC CUADLES

Form 4	LEO											
April 02, 2013	3											
FORM	4		CECUD	TTES AT		TT A R		COMMERION	T	OMB APPROVAL		
	UNITE	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMB Number:	3235-0287			
Check this if no longe	r									January 31, 2005		
subject to Section 16 Form 4 or	SIAIP	STATEMENT OF CHANGES IN BENEFICIAL OWN SECURITIES							Estimated a burden hou response	average irs per		
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange A Section 17(a) of the Public Utility Holding Company Act of 19 30(h) of the Investment Company Act of 1940							f 1935 or Sectio	n				
(Print or Type Ro	esponses)											
1. Name and Address of Reporting Person <u>*</u> BERG CHARLES			2. Issuer Name and Ticker or Trading Symbol DAVITA HEALTHCARE				g	5. Relationship of Reporting Person(s) to Issuer				
	PARTNERS INC. [DVA]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			_X_ Director10% Owner Officer (give titleOther (specify below) below)						
	A HEALTHC INC., 2000 16		03/31/20	13								
	(Street) 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 						
DENVER, C	O 80202								More than One Re			
(City)	(State)	Cately (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				SecuritiesIBeneficially(OwnedIFollowing(ReportedTransaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common Stock	03/31/2013			A <u>(1)</u>	25	А	\$0	9,979	D			

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BERG CHARLES C/O DAVITA HEALTHCARE PARTN 2000 16TH STREET DENVER, CO 80202	ERS INC.	X					
Signatures							
/s/ Kim M. Rivera Attorney-in-Fact	04/02/2013						
<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).
- (1) Grant of Restricted Stock Units, pursuant to the 2011 Incentive Award Plan, which are issuable on 3/31/2014.

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.