## Edgar Filing: Envision Healthcare Holdings, Inc. - Form 4

Envision Healthcare Holdings, Inc. Form 4 October 01, 2014

October 01,	2014										
FORM	14								OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1	state	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
Form 4 c Form 5 obligatio may com <i>See</i> Instr 1(b).	Filed pu ns Section 17	(a) of the	Public U		ding Con	ipany	Act of	Act of 1934, 1935 or Sectior 0	burden hour response	0.5	
(Print or Type ]	Responses)										
Ratton Steve W JR			Symbol	r Name <b>and</b> n Healthc			0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	[EVHC		are noiu	mgs,	me.						
(M			(Month/E	3. Date of Earliest Transaction Month/Day/Year) )9/29/2014				Director 10% Owner X_ Officer (give title Other (specify below) EVP, CSO & Treasurer			
				Amendment, Date Original Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
GREENWO VILLAGE,								Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative S	Securi	ties Acqu	iired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	nsaction Date 2A. Deemed h/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)				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)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock	09/29/2014			М	25,000	А	\$ 3.19	25,000	D		
Common Stock	09/29/2014			S	25,000	D	\$ 34.97	0	D		

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

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 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. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Derivative Expiration Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4,				8 E S (]
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Options (Rights to Buy)	\$ 3.19	09/29/2014		М	25,000	<u>(1)</u>	03/12/2019	Common Stock	25,000	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Ratton Steve W JR 6200 S. SYRACUSE WAY STE 200 GREENWOOD VILLAGE, CO 80111			EVP, CSO & Treasurer				
Signatures							
/s/ Craig A. Wilson, Attorney-in-Fact for S Ratton, Jr.	teve W.	1	0/01/2014				

**Explanation of Responses:** 

\*\*Signature of Reporting Person

\* 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).

These options were originally granted on March 12, 2009 as options to purchase common stock of Envision Healthcare Corporation ("EVHC"), formerly known as Emergency Medical Services Corporation, which were scheduled to vest on the first four anniversaries of

Date

(1) the grant date, subject to continued employment. In connection with the merger of an indirect subsidiary of the Issuer with and into EVHC, with EVHC as the surviving corporation and an indirect wholly owned subsidiary of the Issuer, the options converted to fully vested options to purchase common stock of the Issuer pursuant to a rollover agreement between the reporting person and the Issuer.

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.