Edgar Filing: Tramuto Donato - Form 4

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Tramuto Do	nato										
Form 4											
May 02, 201	8										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB AF	IB APPROVAL		
. •	• • UNITE	D STATES						OMMISSION	OMB	3235-0287	
Check th	uis box		Wa	shington, D.C. 20549					Number:	January 31,	
if no longer subject to STATEMENT OF CHAN				NGES IN BENEFICIAL OWNERS SECURITIES				NEDSHID OF	Expires:	2005	
								VERSHIF OF	Estimated average		
Section Form 4 c				SECURITIES					burden hours per response 0.5		
Form 5	-	oursuant to	Section 1	6(a) of th	e Securit	ies E	xchange	e Act of 1934,	response	0.5	
obligatio	ons Section 1						•	1935 or Sectior	ı		
may con <i>See</i> Instr	unue.			vestment	•	· ·					
1(b).	uetion	. ,			•	-					
(Print or Type)	Responses)										
1 1 1		D *						5 D L () L) (
			er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
	Silato		Symbol								
11				TVITY HEALTH, INC. [TVTY]				(Check all applicable)			
(Last)	(First)	(Middle)		f Earliest Ti	ransaction			W D'	100	0	
			th/Day/Year) 1/2018			_X_ Director 10% Owner _X_ Officer (give title Other (specify					
BOULEVARD			03/01/2	below)					below)		
2002211									CEO		
			endment, Date Original			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 					
			onth/Day/Year)								
FRANKLIN, TN 37067											
	, 11(57007							Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	ate 2A. Dee	med	3.	4. Securit	ies Ac	quired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year) Execution Date,			f Transaction(A) or Disposed of (D)				Securities	Ownership	Indirect	
(Instr. 3)		any (Month/Day/Year)			(Instr. 3, 4	and t	5)	Beneficially Owned	Form: Direct (D) or	Beneficial Ownership	
					(Instr. 8)			Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(msu. 5 and 4)			
Common	05/01/0010			$\mathbf{C}(1)$	00.000	D	\$	140 505	D		
Stock	05/01/2018			S <u>(1)</u>	20,000	D	35.37	149,596	D		
							(2)				

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti 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 Owna 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			
Tramuto Donato 701 COOL SPRINGS BOULEVARD FRANKLIN, TN 37067	Х		CEO				
Signatures							
/s/ Mary Flipse, by power of attorney for Tramuto	,	05/02/2018					
** Signature of Reporting Person			D	ate			

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) The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan.

This transaction was executed in multiple trades at prices ranging from \$35.25 to \$35.53, inclusive. The price reported above reflects the
(2) weighted-average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transactions were effected.

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.