Edgar Filing: ORTENZIO ROBERT A - Form 4

ORTENZIO RO	OBERT A									
Form 4	010									
September 17, 2								ОМ	B APPROV	/AL
FORM	4 UNITED S	STATES					COMMISSI		303	5-0287
Check this b		Washington, D.C. 20549					Expires	Janu	ary 31,	
if no longer subject to Section 16. Form 4 or	STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES								2005 9 0.5
Form 5 obligations may continue <i>See</i> Instruction 1(b).	e. Section 17(a	a) of the l	Public U	tility Hol	ding Coi		nge Act of 1934 of 1935 or Sec 940			
(Print or Type Resp	ponses)									
1. Name and Addr ORTENZIO R	2. Issuer Name and Ticker or Trading Symbol SELECT MEDICAL HOLDINGS CORP [SEM]				5. Relationship of Reporting Person(s) to Issuer					
					(Check all applicable)					
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)						X Director 10% Owner X Officer (give title Other (specify below) below)			
C/O SELECT I HOLDINGS C GETTYSBUR	ORPORATIO	N, 4714	09/14/2	018			/	hairman and C	/	
			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 Form filed by More than One Reporting 				
MECHANICS	BURG, PA 17	055					Person	by More than Or	ie Reporting	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Dispose	d of, or Benef	icially Own	ed
	Transaction Date Ionth/Day/Year)		n Date, if	Code (Instr. 8)	Disposed (Instr. 3,	(A) or l of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		l
Common Stock				Code V	Amount	(D) Price	7,289,039 (1)	D		
Common Stock							509,232	I	By the R A. Orten July 201 GRAT (2)	nzio 7
Common Stock							31,886	Ι	By the R A. Orten 2014 Tru for Brya	nzio ust

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			Ortenzio (2)
Common Stock	31,886	I	By the Robert A. Ortenzio 2014 Trust for Kevin M. Ortenzio (2)
Common Stock	31,885	Ι	By the Robert A. Ortenzio 2014 Trust for Madeline G. Ortenzio
Common Stock	2,750,000	Ι	By the Rocco A. Ortenzio Descendants Trust (2)
Common Stock	1,300,000	Ι	By the Robert A. Ortenzio Descendants Trust (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)

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Titl Amou Under Secur (Instr.	int 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							
FB	Di	irector	10% Owner	Officer	Other			
ORTENZIO ROBERT A C/O SELECT MEDICAL HOLDINGS CORPORATION 4714 GETTYSBURG ROAD MECHANICSBURG, PA 17055		Х		Exec. Chairman and Co-Founder				
Signatures								
/s/ Michael E. Tarvin, as attorney-in-fact	09/17/2018							
**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) 290,768 shares were previously owned by, and contributed by, the Robert A. Ortenzio July 2017 GRAT to Robert A. Ortenzio.
- (2) The reporting person beneficially owns the reported securities indirectly, but disclaims beneficial ownership to the reported securities except to the extent of his pecuniary interest therein.

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.