

MCALLISTER CHARLES J  
 Form 4  
 December 17, 2004

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 MCALLISTER CHARLES J

(Last) (First) (Middle)  
 601 HAWAII ST.  
 (Street)  
 EL SEGUNDO, CA 90245  
 (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
 DAVITA INC [DVA]

3. Date of Earliest Transaction (Month/Day/Year)  
 12/15/2004

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 Chief Medical Officer

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)
			Code	V	Amount (A) or (D) Price		
Common Stock	12/15/2004		M		7,500 A \$ 4.9167	8,499	D
Common Stock	12/15/2004		S		7,500 D \$ 38.9288	999	D
Common Stock	12/15/2004		M		2,500 A \$ 10.2667	3,499	D
Common Stock	12/15/2004		S		2,500 D \$ 38.9288	999	D

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

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(9-02)

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 4.9167	12/15/2004		M	7,500	01/02/2001 <sup>(1)</sup> 07/19/2005	Common Stock	7,500
Stock Options (Right to Buy)	\$ 10.2667	12/15/2004		M	2,500	02/13/2002 <sup>(2)</sup> 02/13/2006	Common Stock	2,500

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MCALLISTER CHARLES J 601 HAWAII ST. EL SEGUNDO, CA 90245			Chief Medical Officer	

## Signatures

/s/ Corinna B. Polk  
Attorney-in-Fact

12/17/2004

\*\*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) The option vested according to the following schedule: 60,000 vested on 01/02/01, 60,000 on 07/19/01, 60,000 on 07/19/02, and 60,000 vested on 07/19/03.

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- (2) The option vested according to the following schedule: 3,750 vested on 02/13/02, 3,750 on 02/13/03, 3,750 on 02/13/04, and 3,750 will vest on 02/13/05.

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.