Edgar Filing: Kaplan Steven N - Form 4

Kaplan Steven Form 4											
January 05, 20								OMB A	APPROVAL		
FORM	4 UNITED	STATES					COMMISSIO		3235-0287		
Check this if no longer subject to Section 16. Form 4 or Form 5	rsuant to S	Washington, D.C. 20549 F CHANGES IN BENEFICIAL C SECURITIES Section 16(a) of the Securities Exch				nge Act of 1934,	Expires: Estimated burden ho response.	January 31, 2005 ated average n hours per			
obligations may contin <i>See</i> Instruc 1(b).	ue. Section 17(•	U	npany Act 19 Act of 1	of 1935 or Secti 940	on			
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person <u>*</u> Kaplan Steven N			2. Issuer Name and Ticker or Trading Symbol Accretive Health, Inc. [AH]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(Last) (First) (Middle)			of Earliest T	_]	(Check all applicable)				
	TIVE HEALTH ORTH MICHIG UITE 2700			Day/Year)			X Director Officer (giv below)		% Owner her (specify		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			վ	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO, I	L 60611						Form filed by Person	More than One R	Reporting		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned		
	. Transaction Date Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	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)		
Reminder: Repor	rt on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.				
·	·				Perso inforr requi	ons who res nation cont red to respo ays a curren	pond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					posed of, or convertible s	Beneficially Owner securities)	d			
1. Title of 2. Derivative Cor		action Date /Day/Year)			4. Transact	5. Number ionof Derivati	6. Date Exercis ve Expiration Date		7. Title and Amount of 8 Underlying Securities E		

Edgar Filing: Kaplan Steven N - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8			(Month/Day/Year)		(Instr. 3 and 4)		S (I	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Director Stock Option (right to buy)	\$ 23.27	01/03/2012		А		1,540		01/03/2012	01/03/2022	Common Stock	1,540	• •

Reporting Owners

Reporting Owner Name / Address		Relationships					
		Director	10% Owner	Officer	Other		
Kaplan Steven N C/O ACCRETIVE HEALTH, INC. 401 NORTH MICHIGAN AVENUE, SUITE CHICAGO, IL 60611	2700	Х					
Signatures							
/s/ Daniel A. Zaccardo, Attorney-in-Fact	01/05/2	2012					
**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).

This option was issued to the reporting person pursuant to the Accretive Health director compensation plan in lieu of retainer fees of (1) \$17,500.

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.