#### TRIAD HOSPITALS INC

Form 4

March 09, 2005

### FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

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**OMB APPROVAL** 

response...

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

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

1(b).

Management

(Print or Type Responses)

1. Name and Address of Reporting Person * MARZOCCO NICHOLAS			2. Issuer Name <b>and</b> Ticker or Trading Symbol TRIAD HOSPITALS INC [TRI]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check an approach)			
5800 TENNYSON PARKWAY		WAY	(Month/Day/Year) 03/09/2005	Director 10% Owner _X Officer (give title Other (specify below) Division President			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
PLANO, TX 7	5024		Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			

						1 0150	••		
(City)	(State) (Zi	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. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or			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	(D)	Price	(Instr. 3 and 4)		
Common Stock	03/09/2005		M	10,000	A	\$ 11.5	20,385	D	
Common Stock	03/09/2005		M	19,900	A	\$ 17.07	40,285	D	
Common Stock	03/09/2005		S	29,900	D	\$ 43.4213	10,385	D	
Common Stock in HCA Inc. 1995							132	D	

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Stock Purchase Plan Common Stock in HCA Inc. Employee 21 D Stock Purchase Plan Common Stock in Triad Retirement 707 I By ESOP Savings Plan **ESOP** Account Common Stock in By Triad 62 Ι 401(k) Retirement plan SavingsPlan Stock Fund

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

\$ 17.07

03/09/2005

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.

SEC 1474

(9-02)

19,900 04/27/2001 04/28/2010

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 or 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 Amou Underlying Securi (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Nun of S
Non-qualified Stock Option (right to buy	\$ 11.5	03/09/2005		M	10,000	04/27/2001	06/10/2009	Common Stock	10,

M

19.

Non-qualified Stock Option (right to buy) Common Stock

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

MARZOCCO NICHOLAS
5800 TENNYSON PARKWAY
PLANO, TX 75024

Division
President

**Signatures** 

Donald P Fay, Attorney-in-fact 03/09/2005

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

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.

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<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).