

TRIAD HOSPITALS INC  
Form 3  
June 02, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF 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 * |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol |                                                                        |
| Â HURLEY REBECCA                          |         | (Month/Day/Year)                     | TRIAD HOSPITALS INC [TRI]                          |                                                                        |
| (Last)                                    | (First) | (Middle)                             | 06/01/2005                                         |                                                                        |
| 5800 TENNYSON PARKWAY                     |         |                                      | 4. Relationship of Reporting Person(s) to Issuer   | 5. If Amendment, Date Original Filed(Month/Day/Year)                   |
| (Street)                                  |         |                                      | (Check all applicable)                             |                                                                        |
| PLANO,Â TXÂ 75024                         |         |                                      | <input type="checkbox"/> Director                  | <input type="checkbox"/> 10% Owner                                     |
| (City)                                    | (State) | (Zip)                                | <input checked="" type="checkbox"/> Officer        | <input type="checkbox"/> Other                                         |
|                                           |         |                                      | (give title below)                                 | (specify below)                                                        |
|                                           |         |                                      | SVP, Gen'l Counsel, Secretary                      |                                                                        |
|                                           |         |                                      |                                                    | 6. Individual or Joint/Group Filing(Check Applicable Line)             |
|                                           |         |                                      |                                                    | <input checked="" type="checkbox"/> Form filed by One Reporting Person |
|                                           |         |                                      |                                                    | <input type="checkbox"/> Form filed by More than One Reporting Person  |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security (Instr. 4)                         | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------|
| Common Stock in Triad Management Stock Purchase Plan    | 101                                                   | D                                                        | Â                                                     |
| Common Stock in Triad Retirement Savings Plan ESOP Acct | 111                                                   | I                                                        | By ESOP                                               |

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership |
|--------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------|---------------------------|----------------------|--------------------------------------------|
|--------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------|---------------------------|----------------------|--------------------------------------------|

Edgar Filing: TRIAD HOSPITALS INC - Form 3

|                                           | Date Exercisable | Expiration Date | (Instr. 4)<br>Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | (Instr. 5) |
|-------------------------------------------|------------------|-----------------|---------------------|----------------------------|------------------------------|------------------------------------------------------------|------------|
| Non-qualified Stock Option (right to buy) | Â (1)            | 02/07/2012      | Common Stock        | 18,000                     | \$ 32.15                     | D                                                          | Â          |
| Non-qualified Stock Option (right to buy) | Â (2)            | 02/06/2013      | Common Stock        | 7,500                      | \$ 25.94                     | D                                                          | Â          |
| Non-qualified Stock Option (right to buy) | Â (3)            | 02/04/2014      | Common Stock        | 14,000                     | \$ 35.52                     | D                                                          | Â          |
| Non-qualified Stock Option (right to buy) | Â (4)            | 04/23/2014      | Common Stock        | 6,000                      | \$ 34.75                     | D                                                          | Â          |
| Non-qualified Stock Option (right to buy) | Â (5)            | 02/03/2015      | Common Stock        | 20,000                     | \$ 42.51                     | D                                                          | Â          |

## Reporting Owners

| Reporting Owner Name / Address                             | Relationships |           |                                    |       |
|------------------------------------------------------------|---------------|-----------|------------------------------------|-------|
|                                                            | Director      | 10% Owner | Officer                            | Other |
| HURLEY REBECCA<br>5800 TENNYSON PARKWAY<br>PLANO, TX 75024 | Â             | Â         | Â SVP, Gen'l Counsel,<br>Secretary | Â     |

## Signatures

Rebecca Hurley                      06/01/2005  
 \_\_Signature of                      Date  
 Reporting Person

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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 vests in four equal annual installments, commencing February 7, 2003.
- (2) The option vests in four equal annual installments, commencing February 6, 2004.
- (3) The option vests in four equal annual installments, commencing February 4, 2005.
- (4) The option vests in four equal annual installments, commencing April 23, 2005.
- (5) The option vests in four equal annual installments, commencing February 3, 2006.

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.