

Edgar Filing: AMERIVEST PROPERTIES INC - Form 4

AMERIVEST PROPERTIES INC
 Form 4
 April 05, 2001

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 WASHINGTON, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(f) of the Investment Company Act of 1940

| | | | | | |
|--|---------|----------|--|--|-----------------|
| 1. Name and Address of Reporting Person* | | | 2. Issuer Name AND Ticker or Trading Symbol | | 6. Relationship |
| Tepper | Jerry | J. | AmeriVest Properties, Inc. (AMV) | | X Director |
| (Last) | (First) | (Middle) | 3. IRS or Social Security Number of Reporting Person, if an entity (Voluntary) | | Officer |
| 7255 North Sheridan Street | | | N/A | | --- |
| (Street) | | | 4. Statement for Month/Year | | --- |
| Arvada | | | 3/01 | | --- |
| (City) | | | 5. If Amendment, Date of Original (Month/Year) | | --- |
| CO | | | 7. Individual (Check appropriate box) | | X Form |
| 80003 | | | Form | | --- |
| (State) | | | Form | | --- |
| (Zip) | | | Repo | | --- |

TABLE I - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIALLY OWNED

| 1. Title of Security (Instr. 3) | 2. Transaction Date (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 at End of Month (Instr. 3 and 4) |
|---------------------------------|--------------------------------------|--------------------------------|---|---|------------|--------|---|
| | | Code | V | Amount | (A) or (D) | Price | |
| Common Stock | 3/29/01 | X | V | 100,000 | A | \$5.00 | 360,000 |
| | | | | | | | 50,000 |

Edgar Filing: AMERIVEST PROPERTIES INC - Form 4

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.
 * If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the collection displays a currently valid OMB control number.

FORM 4 (continued)

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) | 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) | |
|---|--|---|-----------------------------------|---|---|---------|---|-----------------|
| | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date |
| Common Stock Warrants | \$5.00 | 3/29/01 | X | | | 100,000 | Immed. | 7/10/01 |

| 1. Title of Derivative Security (Instr. 3) | 9. Number of Derivative Securities Beneficially Owned at End of Month (Instr. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|
| Common Stock Warrants | | 50,000 | (a) |

Edgar Filing: AMERIVEST PROPERTIES INC - Form 4

Explanation of Responses:

(a) Held in corporations in which reporting person has an indirect pecuniary interest. Reporting ownership over portion of interest not attributable to reporting person.

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

/s/ Deborah J

Deborah J. Fr
Attorney-in-F

Note: File three copies of this Form, one of which must be manually signed.
If space provided 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.