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Singh Harm Form 4	iit J									
March 04, 2	2010							0.15		
FORM		STATES	SECII	DITIES A	ND FY	CHANCE		T	PPROVAL	
Check t	UNITED	STATES		shington				N OMB Number:	3235-0287	
if no lor	nger	IENT OF	CILAN	ICEC IN	DENIER			Expires:	January 31, 2005	
subject to Section 16. SECURITIES Form 4 or						WNERSHIP OF	Estimated burden hou response	average Jrs per		
Form 5 obligations may continue.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 19401(b).										
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Singh Harmit J			2. Issuer Name and Ticker or Trading Symbol			Trading	5. Relationship of Reporting Person(s) to Issuer			
Hyatt Hotels Corp			·		(Che	heck all applicable)				
(Last) (First) (Middle) C/O HYATT HOTELS CORPORATION, 71 S. WACKER			3. Date of Earliest Transaction(Month/Day/Year)03/02/2010				Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
	TH FLOOR						Chie	I Financial Offic	cer	
			4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person 				
CHICAGO					Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution I any (Month/Day	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	port on a separate line	e for each cla	ss of seci	urities benet	ficially ow	ned directly o	or indirectly.			
					Perso inform requir	ns who res nation cont red to respo ays a curre	spond 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	Beneficially Owner	1		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orDerivative	Expiration Date	Underlying Securitie

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	· ·	Securities Acquired (or Dispose (D) (Instr. 3, 4 and 5)	(A) ed of	(Month/Day/	'Year)	(Instr. 3 and 4	4)
				Code V	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amour or Numbe of Shar
Stock Appreciation Rights	\$ 33.12	03/02/2010		A		25,894		<u>(1)</u>	03/02/2020	Class A Common Stock	25,89
Restricted Stock Units	<u>(2)</u>	03/02/2010		А		22,454		(3)	<u>(3)</u>	Class A Common Stock	22,45

Reporting Owners

Reporting Owner Name / Address	Relationships					
I O	Director	10% Owner	Officer	Other		
Singh Harmit J C/O HYATT HOTELS CORPORATION 71 S. WACKER DRIVE, 12TH FLOOR CHICAGO, IL 60606			Chief Financial Officer			
Signatures						

/s/ Harmit J. Singh	03/04/2010		
<u>**</u> 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 stock appreciation rights issued pursuant to the Amended and Restated Hyatt Hotels Corporation Long-Term Incentive Plan (the LTIP) vest in four equal annual installments beginning on March 2, 2011.
- (2) Each restricted stock unit represents the contingent right to receive one share of Class A Common Stock.
- The restricted stock units issued pursuant to the LTIP vest and become payable in four equal annual installments beginning on March 2,(3) 2011. The restricted stock units will be settled in Class A Common Stock or, at the election of the administrator of the LTIP, cash, upon vesting, subject to earlier settlement upon death or disability or a change of control of the Issuer.

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.