FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | hours per response: | 0.5 | | | | | | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* DEGHETTO MARTIN F | | | | | | 2. Issuer Name and Ticker or Trading Symbol TELETECH HOLDINGS INC [TTEC] | | | | | | | | | lationship o k all applic Directo | able) | reporting Person(s) to Issuer le) 10% Owner | | |
|---|---|------------|---|---------------------------|---|--|---|--------|--|--------|---------------------|-------------------|---|--|--|--|--|--|------------|
| (Last) 9197 S. I |) (First) (Middle) 7 S. PEORIA STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/25/2013 | | | | | | | | | Officer (give title below) EVP, Globa | | Other (s below) erations | pecify |
| (Street) ENGLEV (City) | | O tate) | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Form fi | r Joint/Group Filing (Check Applicable filed by One Reporting Person filed by More than One Reporting | | | | |
| | | Tab | le I - No | n-Deriv | /ative | e Se | curit | ies Ac | quired, | Dis | posed o | of, or E | Benef | ficially | Owned | l | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/E | | | action | ı i | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | A) or | 5. Amou Securitie Benefici Owned F | nt of es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | | Price | Reported Transact (Instr. 3 | tion(s) | | | (Instr. 4) |
| Common Stock ⁽¹⁾ 03/25/ | | | | 5/201 | 2013 | | М | | 12,50 | 0 1 | 4 | \$ <mark>0</mark> | 67,025 | | | D | | | |
| Common | ommon Stock ⁽²⁾ 03/25 | | | 5/2013 | 2013 | | F | | 5,067 | 7] |) ; | \$21.13 | 61 | ,958 | | D | | | |
| | | - | Гable II - | | | | | | | | osed of, onverti | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deeme Execution if any (Month/Da | Date, Transac Code (Ir | | | | | 6. Date E Expiratio (Month/D | n Date | of Securities | | curity | . Price of erivative ecurity nstr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | ly Ov Fo Dii or (I) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | | | | | |
| Restricted Stock | \$0 | 03/25/2013 | | | М | | | 12,500 | (1) | | (1) | Commo | | 2,500 | \$0 | 12,500 | | D | |

Explanation of Responses:

- 1. Reflects vesting of Restricted Stock Units ("RSUs") on March 25, 2013. The Reporting Person initially received 50,000 time-based RSUs on March 25, 2010. The RSUs vest in four equal installments of 12,500 per year beginning on March 25, 2011.
- $2.\ Reflects\ withholding\ of\ shares\ to\ satisfy\ tax\ obligations\ in\ connection\ with\ the\ vesting\ of\ RSUs.$

/s/ Karen Breen, Attorney-in-Fact for Martin F. DeGhetto

03/27/2013

** Signature of Reporting Person

Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.