Edgar Filing: CHAPMAN RICHARD E - Form 4

CHAPMAN Form 4 March 28, 20											
FORM	4 UNITER	D STATES					NGE C	COMMISSION	OMB	PROVAL 3235-0287	
Check this if no long subject to Section 10 Form 4 or Form 5 obligation	Washington, D.C. 20549 F CHANGES IN BENEFICIAL OW SECURITIES Section 16(a) of the Securities Exchang Public Utility Holding Company Act of					e Act of 1934,	Expires: January 3 Expires: 20 Estimated average burden hours per response				
may conti <i>See</i> Instru 1(b).	nue.			vestment	•	· ·			1		
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> CHAPMAN RICHARD E			2. Issuer Name and Ticker or Trading Symbol KINDRED HEALTHCARE, INC [KND]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 680 SOUTH	(First) FOURTH ST	(Middle) REET	3. Date of (Month/D 03/26/20	•	ansaction			Director X_Officer (give below) Exec VI			
				ndment, Da th/Day/Year)	-	l		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
LOUISVILL	LE, KY 40202							Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any		3. Transactio Code	4. Securi n(A) or Di (Instr. 3,	ties Ad spose 4 and (A) or	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial	
Common Stock	03/26/2013			F		D	\$ 10.85	55,856	D		

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

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 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying tities (. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
	11441055	Director	10% Owner	Officer	Other				
CHAPMAN RICHARD E 680 SOUTH FOURTH ST LOUISVILLE, KY 40202	TREET			Exec VP & Chief Admin					
Signatures									
Richard E. Chapman	03/27/201	3							

<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).

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.