KINDRED HEALTHCARE, INC

Form 4 May 12, 2008

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

STATEMENT OF CHANGES IN 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

See Instruction 1(b).

(Last)

Form 5

obligations

may continue.

(Print or Type Responses)

1. Name and Address of Reporting Person * **BOWEN LANE M**

(First)

680 SOUTH FOURTH STREET

2. Issuer Name and Ticker or Trading

Symbol

KINDRED HEALTHCARE, INC [KND]

3. Date of Earliest Transaction

(Month/Day/Year) 05/09/2008

(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

(Middle)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

OMB

Number:

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response...

Estimated average

burden hours per

Director 10% Owner _X__ Officer (give title _ Other (specify below) Exec VP & Pres, HS Div

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

LOUISVILLE, KY 40202

(City)	(State)	(Zip) Tabl	e I - Non-D	D erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	n Date, if Transaction Code		4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A) or	D.,	Transaction(s) (Instr. 3 and 4)		
Common Stock	05/09/2008		Code V M	Amount 4,302	(D)	Price \$ 16.81	54,373	D	
Common Stock	05/09/2008		S	4,602	D	\$ 28	49,771	D	
Common Stock	05/09/2008		S	200	D	\$ 28.3	49,571	D	
Common Stock	05/09/2008		S	400	D	\$ 28.28	49,171	D	
Common Stock	05/09/2008		S	1,000	D	\$ 28.27	48,171	D	

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Common Stock	05/09/2008	S	400	D	\$ 28.26	47,771	D
Common Stock	05/09/2008	S	2,202	D	\$ 28.25	45,569	D
Common Stock	05/09/2008	S	100	D	\$ 28.29	45,469	D

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

3. Transaction Date 3A. Deemed

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SEC 1474

(9-02)

6. Date Exercisable and

7. Title and Amount of

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transacti Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	ecurities (Month/Day/Year) cquired A) or isposed of D) nstr. 3, 4,		Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Shares
Employee Stock Option (Right to Buy)	\$ 16.81	05/09/2008		M	4,302	02/23/2008(1)	02/23/2013	Common Stock	4,302

5. Number

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BOWEN LANE M 680 SOUTH FOURTH STREET LOUISVILLE, KY 40202			Exec VP & Pres, HS Div					

Signatures

1. Title of

Lane M. Bowen 05/09/2008

**Signature of Reporting Person Date

Reporting Owners 2

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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) These options are exercisable in the following cumulative installments: 4,302 on 2/23/08, 4,303 on 2/23/09 and 4,303 on 2/23/10.

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.