Edgar Filing: Miller Gregory C - Form 4

Miller Gregor Form 4											
February 07, 2 FORM Check this if no longe subject to Section 16	4 UNITE		TES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 TOF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						OMB Number: Expires: Estimated a	Number: 3235-0287	
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								response	0.5		
(Print or Type Ro	esponses)										
Miller Gregory C Syr			Symbol	2. Issuer Name and Ticker or Trading Symbol KINDRED HEALTHCARE, INC				5. Relationship of Reporting Person(s) to Issuer			
[KND								(Check all applicable)			
(Month				eate of Earliest Transaction onth/Day/Year) 06/2011				Director 10% Owner X Officer (give title Other (specify below) below) Sr. V.P., Development			
				If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
LOUISVILL	E, KY 40202							Form filed by M Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/06/2011			Code V A	Amount 3,867 (1)	(D) A	Price \$ 0	(Instr. 3 and 4) 36,631	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)

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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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day, e	ion Date /Day/Year)		le and int of rlying ities . 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		

Reporting Owners

Reporting Owner Name / Add	dress	Relationships						
	Director	10% Owner	Officer	Other				
Miller Gregory C 680 SOUTH FOURTH STREET LOUISVILLE, KY 40202 Signatures			Sr. V.P., Development					
Gregory C. Miller	02/07/2011							

<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) These shares represent common stock granted to the reporting person in satisfaction of vested Performance Units.

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.