**BOWEN LANE M** Form 4 March 21, 2013

### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**OMB APPROVAL** OMB

3235-0287 Number: January 31,

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Check this box

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940 See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **BOWEN LANE M** Issuer Symbol

> KINDRED HEALTHCARE, INC (Check all applicable) [KND]

(Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_ Officer (give title Other (specify (Month/Day/Year)

below) 680 SOUTH FOURTH STREET 03/20/2013 Exec VP & Pres, NC Div

(Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

11.15

Person

LOUISVILLE, KY 40202

Stock

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities Form: Direct Indirect (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially (D) or Beneficial Owned Indirect (I) Ownership (Month/Day/Year) (Instr. 8) Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) (Instr. 3 and 4) V Amount (D) Price Common 03/20/2013 F 612 D 67,331 D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

#### Edgar Filing: BOWEN LANE M - Form 4

| 1. Title of Derivative | 2. Conversion                            | 3. Transaction Date (Month/Day/Year) |                      | 4.<br>Transactio | 5.<br>Mumber   | 6. Date Exercisable and Expiration Date |                    | 7. Title and Amount of                 |         | 8. Price of Derivative | 9. Nu<br>Deriv  |
|------------------------|--|--------------------------------------|----------------------|------------------|--|---|--------------------|--|---------|------------------------|---|
| Security (Instr. 3)    | or Exercise Price of Derivative Security | (монил дау/ теаг)                    | any (Month/Day/Year) | Code (Instr. 8)  | of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) |   |                    | Underlyin<br>Securities<br>(Instr. 3 a | ng<br>s | Security<br>(Instr. 5) | Secur<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|                        |  |                                      |                      | Code V           | (A) (D)  | Date<br>Exercisable                     | Expiration<br>Date | or<br>Title Nu<br>of                   | umber   |                        |   |

# **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, NC Div

## **Signatures**

Lane M. Bowen 03/21/2013

\*\*Signature of 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.

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