#### KUNTZ EDWARD L Form 4

April 28, 2005

### FORM 4

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

OMB 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person ** KUNTZ EDWARD L			2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
			KINDRED HEALTHCARE, INC [KND]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	_X_ Director 10% Owner		
680 SOUTH FOURTH STREET			(Month/Day/Year)	_X_ Officer (give title Other (specify below)  Executive Chairman		
			04/27/2005			
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
			Filed(Month/Day/Year)	Applicable Line)		
LOUISVILLE KY 40202				_X_ Form filed by One Reporting Person Form filed by More than One Reporting		

#### LOUISVILLE, KY 40202

(City)	(State)	Zip) Table	e I - Non-D	Perivative Securities	s Acquired, Disposed	of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code	4. Securities Acquion(A) or Disposed of (D)		6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)  Code V	(Instr. 3, 4 and 5)  (A) or Amount (D) F	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	04/27/2005		A	15,810 A \$	\$ 0 206,007	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.

Person

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

#### Edgar Filing: KUNTZ EDWARD L - Form 4

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. Transaction Code (Instr. 8)	5. Number of or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitic (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 31.09	04/27/2005		A	12,732	04/27/2006(2)	04/27/2012	Common Stock	12,7
Employee Stock Option (Right to Buy)	\$ 31.09	04/27/2005		A	6,432	04/27/2008(3)	04/27/2012	Common Stock	6,43

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
KUNTZ EDWARD L 680 SOUTH FOURTH STREET LOUISVILLE, KY 40202	X		Executive Chairman			

## **Signatures**

Edward L.

Kuntz

\*\*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 restricted stock granted to the reporting person. These shares vest in equal annual installments over four years commencing on 4/27/06.
- (2) This option becomes exercisable in the following cumulative installments: 4,791 on 4/27/06, 4,791 on 4/27/07, 1,575 on 4/27/08 and 1,575 on 4/27/09.
- (3) This option becomes exercisable in the following cumulative installments: 3,216 on 4/27/08 and 3,216 on 4/27/09.

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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