KINDRED HEALTHCARE, INC

Form 4

February 27, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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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).

(Print or Type Responses)

1. Name and Address of Reporting Person * BATTAFARANO FRANK J	2. Issuer Name and Ticker or Trading Symbol KINDRED HEALTHCARE, INC [KND]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (First) (Middle) 680 SOUTH FOURTH STREET	3. Date of Earliest Transaction (Month/Day/Year) 02/23/2006	Director 10% OwnerX Officer (give title Other (specify below) Exec VP & Pres, Hospital Div		
(Street) LOUISVILLE, KY 40202	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tabl	e I - Non-E	Derivative S	Securi	ities Acqu	iired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			5. Amount of Securities Ownership Beneficially Form: Direct Owned (D) or Following Indirect (I) Reported (Instr. 4) Transaction(s) (Instr. 3 and 4)	Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/23/2006		Code V F	Amount 2,285	(D)	Price \$ 21.99	84,068 <u>(1)</u>	D	
Common Stock	02/23/2006		A	16,244 (2)	A	\$0	100,312 (1)	D	

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

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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. Transaction Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date		7. Title and Amount Underlying Securiti (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy)	\$ 21.99	02/23/2006		A	6,049	02/23/2007(3)	02/23/2013	Common Stock	6,04
Employee Stock Option (Right to Buy)	\$ 21.99	02/23/2006		A	13,641	02/23/2008(4)	02/23/2013	Common Stock	13,6

Reporting Owners

Reporting Owner Name / Address	Relationships						
*****	Director	10% Owner	Officer	Other			
BATTAFARANO FRANK J			Exec VP &				
680 SOUTH FOURTH STREET			Pres, Hospital				
LOUISVILLE, KY 40202			Div				

Signatures

Frank J.

Battafarano 02/27/2006

**Signature of Date Reporting Person

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) This reporting person also indirectly owns fifty shares of common stock held jointly with his mother.
- (2) These shares represent restricted stock granted to the reporting person. These shares vest in equal annual installments over four years commencing on 2/23/2007.
- (3) This option becomes exercisable in the following cumulative installments: 4,922 on 2/23/07, 376 on 2/23/08, 375 on 2/23/09 and 376 on 2/23/10.
- (4) This option vests in the following cumulative installments: 4,547 on 2/23/08, 4,547 on 2/23/09 and 4,547 on 2/23/10.

Reporting Owners 2

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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.