Edgar Filing: HEALTH CARE REIT INC /DE/ - Form 4

Form 4 March 11, 2		DE/	-						OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Workington D.C. 20549									OMB Number:	3235-0287		
Check th if no lon subject t Section Form 4 o	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									January 31, 2005 verage rs per 0.5		
Form 5 obligatic may con <i>See</i> Instr 1(b).	tinue. Section 17(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										
(Print or Type	Responses)											
1. Name and A HERMAN	Symbol	r Name and TH CARE			-	5. Relationship of Reporting Person(s) to Issuer						
		[HCN]					(Check all applicable)					
(Last) 4500 DORI	(First) (N R STREET	3. Date of (Month/E 03/10/2		ansaction			Director 10% Owner X Officer (give title Other (specify below) below) EVP/Pres, Srs. Hous/Post Acute					
		endment, Da nth/Day/Year	-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person						
TOLEDO,	OH 43615						Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tabl	le I - Non-D	Derivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Transaction Date 2A. Deemed Ionth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securit on(A) or Dis (Instr. 3, 4	sposed	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)		
G				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	03/10/2015			S <u>(1)</u>	1,000	D	\$ 74.21	58,244	D			
Common Stock	03/10/2015			J	13,361	D	\$ 0 <u>(2)</u>	44,883	D			
Common Stock	03/10/2015			J	13,361	А	\$ 0 <u>(2)</u>	45,608	Ι	LLC (3)		

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

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number.

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. Transacti (Month/Day	y/Year)	3A. Deemed Execution Date, any (Month/Day/Ye	Co	4. 5. TransactionNumber Code of (Instr. 8) Derivati Securitie (A) or Dispose of (D) (Instr. 3 4, and 5				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
Repor	rting O	wners	5		Cc	ode V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting	Owner Name	/ Address	Di	107 0		Relations	ships						
			Director	r 10% Owner	Office	er			Other				

EVP/Pres, Srs. Hous/Post Acute

Date

HERMAN CHARLES J JR 4500 DORR STREET TOLEDO, OH 43615

Signatures

By: Erin C. Ibele Attorney-in-Fact For: Charles J. 03/11/2015 Herman, Jr.

**Signature of 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) The shares covered by this Form 4 have been sold pursuant to a Rule 10b5-1 Sales Plan dated December 16, 2014.
- (2) The shares were transferred by Mr. Herman to the Ohio limited liability company described in footnote 3. No amount was paid in connection with this transfer.
- (3) The shares are held by an Ohio limited liability company for which the reporting person is the sole manager and, as trustee for a revocable trust of the reporting person, the sole member.

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.