### HEALTH CARE REIT INC /DE/

Form 5

February 13, 2008

#### **OMB APPROVAL** FORM 5 **OMB**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4

Transactions Reported

1. Name and Address of Reporting Person \* 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer CHAPMAN GEORGE L Symbol HEALTH CARE REIT INC /DE/ (Check all applicable) [HCN] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) \_X\_ Director 10% Owner \_X\_ Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2007 Chairman and CEO ONE SEAGATE. SUITE 1500 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line)

## TOLEDO, Â OHÂ 43604

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Disposed of (Instr. 3, 4 and	(D) and 5) (A) or		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	02/20/2007	Â	J <u>(1)</u>	Amount 40.5571	(D)	Price \$ 46.2717	283,251.3873	D	Â
Common Stock	05/21/2007	Â	J <u>(1)</u>	97.2481	A	\$ 43.1876	283,348.6354	D	Â
Common Stock	08/20/2007	Â	J <u>(1)</u>	115.8677	A	\$ 36.3374	283,464.5031	D	Â
Common Stock	11/20/2007	Â	J <u>(1)</u>	102.7272	A	\$ 42.3713	283,567.2303	D	Â
	02/20/2007	Â	<u>J(1)</u>	66.7207	A		10,649.2516	I	IRA (2)

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January 31,

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Number:

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Estimated average

burden hours per

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Common Stock						\$ 46.2717			
Common Stock	05/21/2007	Â	J <u>(1)</u>	164.0642	A	\$ 43.1876	10,813.3158	I	IRA (2)
Common Stock	08/20/2007	Â	J <u>(1)</u>	187.4157	A	\$ 36.3374	11,000.7315	I	IRA (2)
Common Stock	11/20/2007	Â	J <u>(1)</u>	174.7408	A	\$ 42.3713	11,175.4723	I	IRA (2)
Common Stock	02/20/2007	Â	J <u>(1)</u>	24.3598	A	\$ 46.2717	3,888.0614 (3)	I	Account for Son
Common Stock	05/21/2007	Â	J <u>(1)</u>	59.9001	A	\$ 43.1876	3,947.9615 (3)	I	Account for Son (4)
Common Stock	08/20/2007	Â	<u>J(1)</u>	68.4257	A	\$ 36.3374	4,016.3872 <u>(3)</u>	I	Account for Son (4)
Common Stock	11/20/2007	Â	J <u>(1)</u>	63.7983	A	\$ 42.3713	4,080.1855 <u>(3)</u>	I	Account for Son
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						EC 2270 (9-02)

contained in this form are not required to respond unless the form displays a currently valid OMB control number.

of

Shares

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(A) (D)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	ınt of	Derivative	0
Security	or Exercise	• •	any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Γ
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	`	, ,	Secur	5 0	(Instr. 5)	S
(======================================	Derivative		()	(======================================	Securities				. 3 and 4)	()	F
	Security				Acquired			(IIIsti	. 5 una 1)		C
	Security				(A) or						F
					` /						I.
					Disposed						17
					of (D)						ŀ
					(Instr. 3,						(]
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						LACICISABIC	Dute		of		

(e.g., puts, calls, warrants, options, convertible securities)

# **Reporting Owners**

Reporting Owner Name / Address

Relationships

2 Reporting Owners

### Edgar Filing: HEALTH CARE REIT INC /DE/ - Form 5

Director 10% Owner Officer Other

CHAPMAN GEORGE L ONE SEAGATE SUITE 1500 TOLEDO, OHÂ 43604

X Â Â Chairman and CEO Â

# **Signatures**

By: Erin C. Ibele Attorney-in-Fact For: George L.
Chapman

02/13/2008

\*\*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) Dividend Reinvestment under the Amended and Restated Dividend Reinvestment and Stock Purchase Plan.
- (2) George L. Chapman III SSB IRA Rollover Custodian.
- (3) George L. Chapman disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that he was or is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.
- (4) Account for son of George L. Chapman.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Signatures 3