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

HEALTH CA Form 4 March 22, 20	Л								OMB AF	PPROVAL	
	STATES	SECURITIES AND EXCHANGE CO Washington, D.C. 20549				NGE C	OMMISSION	OMB Number:	3235-0287		
Check this if no longe subject to Section 16 Form 4 or Form 5	er STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: Estimated a burden hou response	ed average nours per	
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> GRUA PETER J			2. Issuer Name and Ticker or Trading Symbol HEALTH CARE REIT INC /DE/				-	5. Relationship of Reporting Person(s) to Issuer			
			[HCN]					(Check all applicable)			
(1				3. Date of Earliest Transaction (Month/Day/Year) 03/21/2012				X_ Director10% Owner Officer (give titleOther (specify below)below)			
				f Amendment, Date Original ed(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 			
		(T)						Person			
(City)		(Zip)		e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		3. Transactic Code (Instr. 8) Code V	(Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock								3,887	D		
Common Stock	03/21/2012			М	1,666	A	\$ 25.82	23,942	Ι	LLC (1)	

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. Transactic Code (Instr. 8)	5. Number on f 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 of Underlying Securities8(Instr. 3 and 4)S(1)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (Right to Buy)	\$ 25.82	03/21/2012		М	1,666 (2)	01/28/2006	01/28/2013	Common	1,666 (2)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
GRUA PETER J C/O HEALTH CARE REIT, INC. 4500 DORR STREET TOLEDO, OH 43615	Х						
Signatures							
By: Erin C. Ibele Attorney-in-Fact For: Peter J. Grua				03/22/2012			
**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) Front Garden Investment LLC.
- (2) Options for the purchase of 5,000 shares of common stock at \$25.82 per share were granted to Mr. Grua on January 28, 2003, which grant has previously been reported. The exercise of options to purchase 3,334 shares has previously been reported.
- (3) The options were granted under the Health Care REIT, Inc. 1997 Stock Plan for Non-Employee Directors and had no acquisition price.

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.