MANOR CARE INC

Form 4 May 31, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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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

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address Hood Lynn M	s of Reporting	Person *	2. Issuer Name and Ticker or Trading Symbol MANOR CARE INC [HCR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) (I	First) (Middle)	3. Date of Earliest Transaction			
333 NORTH SUMMIT STREET		EET	(Month/Day/Year) 05/29/2007	Director 10% OwnerX_ Officer (give title Other (specify below) Vice President		
(\$	Street)		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		
TOLEDO, OH 43604				Form filed by More than One Reporting Person		
(City) (9	State)	(Zip)				

(City)	(State) (2	Table	e I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of	2. Transaction Date		3.	4. Securit			5. Amount of	6. Ownership	7. Nature of		
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	TransactionAcquired (A) or Code Disposed of (D)		Securities Form: Direct Beneficially (D) or		Indirect Beneficial				
(msu. 3)		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)		Owned Indirect (I) Following (Instr. 4)		Ownership (Instr. 4)			
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				
Common Stock	05/29/2007		A	15.3	A	\$0	6,088	D			
Common Stock	05/29/2007		J	0.1 (1)	A	<u>(1)</u>	34.2	I	401(K) Plan		

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)	4. Transactic Code (Instr. 8)	5. onNumber of 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 Securities (Instr. 3 and 4)		8. Price o Derivativ Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(2)</u>	05/29/2007	A	6.6	(2)	<u>(2)</u>	Common Stock	6.6	\$ 67.85

Reporting Owners

Reporting Owner Name / Address	Relationships							
F •- • 	Director	10% Owner	Officer	Other				
Hood Lynn M								
333 NORTH SUMMIT STREET			Vice President					
TOLEDO, OH 43604								

Signatures

By: Richard A. Parr, attorney-in-fact For: Lynn Hood

05/31/2007

**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) Shares of Common Stock acquired under the HCR Manor Care Stock Purchase and Retirement Savings 401 (k) Plan resulting from the plan trustee's reinvestment of dividends.
- Shares of Phantom Stock acquired under the HCR Manor Care Senior Management Savings Plan for Corporate Officers resulting from the reinvestment of dividends. Each share of Phantom Stock represents the right to receive the cash value of one share of HCR Common Stock. Shares of Phantom Stock are payable in cash following the reporting person's termination of employment with HCR. The reporting person may transfer his or her Phantom Stock account into an alternative investment account at any time.

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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