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

HEALTH CARE REIT INC /DE/ Form 5 February 14, 2006

FORM	5				OMB AI	PPROVAL
	UNII	TED STATES	S SECURITIES AND EXCHANGE ( Washington, D.C. 20549	COMMISSION	OMB Number:	3235-0362
Check this bo no longer sub			Expires:	January 31, 2005		
to Section 16. Form 4 or For 5 obligations may continue See Instructio	rm 4	ANNUAL ST	Estimated a burden hou response	average Irs per		
1(b).	File	n $17(a)$ of the	Section 16(a) of the Securities Exchang Public Utility Holding Company Act of of the Investment Company Act of 19	of 1935 or Section	I	
1. Name and Add TRUMBULL	-	-	2. Issuer Name <b>and</b> Ticker or Trading Symbol HEALTH CARE REIT INC /DE/ [HCN]	5. Relationship of I Issuer (Check	Reporting Pers	
(Last)	(First)	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2005	X_ Director Officer (give t below)		6 Owner er (specify
C/O HEALTH	CARE R	EIT,				

C/O HEALTH CARE REIT, INC., ONE SEAGATE, SUITE

1500

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

### TOLEDO, OHÂ 43604

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

6. Individual or Joint/Group Reporting

(check applicable line)

- . . . .

(City)	(State)	(Zip) Ta	ble I - Non-De	erivative Secu	Acquired, D	oisposed of, or Be	neficially Ow	ned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed 3. Execution Date, if Transaction any Code (Month/Day/Year) (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	02/22/2005	Â	J <u>(1)</u>	Amount 290.2079	(D) A	Price \$ 33.9139	(Instr. 3 and 4) 25,597.4206	(Instr. 4) D	Â
Common Stock	05/20/2005	Â	J <u>(1)</u>	299.0246	A	\$ 33.1171	25,896.4452	D	Â
Common Stock	08/22/2005	Â	J <u>(1)</u>	407.468	А	\$ 35.1722	26,303.9132	D	Â
	11/21/2005	Â	J <u>(1)</u>	436.6403	А		26,740.5535	D	Â

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Common Stock						\$ 34.5264			
Common Stock	02/22/2005	Â	J <u>(1)</u>	97.3257	А	\$ 33.9139	5,661.1142	Ι	IRRA (2)
Common Stock	05/20/2005	Â	J <u>(1)</u>	100.2826	А	\$ 33.1171	5,761.3968	Ι	IRRA (2)
Common Stock	08/22/2005	Â	J <u>(1)</u>	98.2688	А	\$ 35.1722	5,859.6656	I	IRRA (2)
Common Stock	11/21/2005	Â	J <u>(1)</u>	105.3041	А	\$ 34.5264	5,964.9697	I	IRRA (2)

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 the form displays a currently valid OMB control 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. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr 2		ate	7. Tit Amou Unde: Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	of D Se B O E I S Fi
					(Instr. 3, 4, and 5)						(I
					, , ,	Date Exercisable	Expiration Date	Title	Amount or Number		

(A) (D)

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationsl	nips			
	Director	10% Owner	Officer	Other		
TRUMBULL R SCOTT C/O HEALTH CARE REIT, INC. ONE SEAGATE, SUITE 1500 TOLEDO, OH 43604	ÂX	Â	Â	Â		
Signatures						
By: Erin C. Ibele Attorney-in-Fact F Trumbull	cott	(	)2/14/2006			
**Signature of Reporting Pers			Date			

SEC 2270

of

Shares

(9-02)

# **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) Richard Scott Trumbull IRRA for benefit of Richard Scott Trumbull.

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.