Edgar Filing: INVACARE CORP - Form 5

INVACAR	E CORP										
Form 5											
February 13	, 2009										
FORM	15							OMB A	PPROVAL		
	-		S SECURITIES AND EXCHANGE C Washington, D.C. 20549 ATEMENT OF CHANGES IN BENI OWNERSHIP OF SECURITIES				OMMISSION	OMB Number:	3235-0362		
Check thi no longer	subject	W						Expires:	January 31, 2005		
to Section Form 4 or 5 obligati may cont	r Form ANN ions inue.						FICIAL	Estimated a burden hou response	average Irs per		
See Instru 1(b).	Filed purs	uant to Section	16(a) of the S	Securities	Excl	hange	Act of 1934.				
· · /	Ioldings Section 17(a) of the Public		ng Compa	any A	ct of	1935 or Sectio	n			
1. Name and A Gudbranson	Address of Reporting F n Robert K	Symbo	2. Issuer Name and Ticker or Trading Symbol INVACARE CORP [IVC]				5. Relationship of Reporting Person(s) to Issuer				
							(Check all applicable)				
(Last) ONE INVA	(First) (M	(Month	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2008				Director 10% Owner X Officer (give title Other (specify below) below) Sr. VP and CFO				
	(Street)	4. If At	nendment, Date	Original			6. Individual or Jo	oint/Group Rer	orting		
			Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
	011. 44025										
EL I KIA,A	OHÂ 44035						_X_ Form Filed by Form Filed by ! Person				
(City)	(State) (Zip) Ta	ble I - Non-Der	ivative Sec	uritie	s Acqu	ired, Disposed of	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	Disposed	rities 5. A ed (A) or Sec ed of (D) Ber 3, 4 and 5) Ow (A) Fis or (In		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)				
Common Shares	Â	Â	Â	Â	Â	Â	12,800	D	Â		

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

INVACARE CORP

Persons who respond to the collection of information SE contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 2270 (9-02)

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

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

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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 Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration E (Month/Day e	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	Â	Â	Â	Â	ÂÂ	(2)	(2)	Common Shares	49,800	

Reporting Owners

Reporting Owner Name / Addres	S	Relationships							
i O	Director	10% Owner	Officer	Other					
Gudbranson Robert K ONE INVACARE WAY ELYRIA, OH 44035	Â	Â	Sr. VP and CFO	Â					
Signatures									
/s/ Robert K. Gudbranson	02/13/2009)							
**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) No transaction is being reported on this line. Reported on a previously filed Form 3, Form 4, or Form 5.

The reporting person holds previously reported options to buy 49,800 Common Shares (with tandem tax withholding rights) under the Invacare Corporation 2003 Performance Plan, granted in reliance upon the exemption provided by Rule 16b-3. All options were granted

(2) Invacate Corporation 2003 refrontance Plan, granted in refnance upon the exemption provided by Rule 100-3. An options were granted between April 1, 2008 and August 20, 2008, at an exercise price between \$22.38 and \$25.79 per share, will expire between April 1, 2018 and August 20, 2018 and became or will become exercisable between March 31, 2009 and September 30, 2012.

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.