### Edgar Filing: INVACARE CORP - Form 4

INVACARE	ECORP						
Form 4 May 17, 201	2						
FORM		ES SECURITIES AND EXCHA		OMB APPROVAL			
	OMB 3235-0287						
Check th if no long subject to Section 1	statement statement	OF CHANGES IN BENEFICIA SECURITIES	GES IN BENEFICIAL OWNERSHIP OF SECURITIES				
Form 4 c Form 5 obligatio may con <i>See</i> Instr 1(b).	Filed pursuant t ns tinue. Section 17(a) of th	o Section 16(a) of the Securities I ae Public Utility Holding Compan h) of the Investment Company A	y Act of 1935 or Section	response 0.5			
(Print or Type ]	Responses)						
1. Name and A Gudbransor	Address of Reporting Person *	2. Issuer Name <b>and</b> Ticker or Trad Symbol INVACARE CORP [IVC]	Issuer	f Reporting Person(s) to ck all applicable)			
(Last)	(First) (Middle)	3. Date of Earliest Transaction	(Check				
ONE INVA	CARE WAY	(Month/Day/Year) 05/15/2012					
(Street) 4. If Amer		4. If Amendment, Date Original		6. Individual or Joint/Group Filing(Check			
ELYRIA, C	DH 44035	Filed(Month/Day/Year)	_X_ Form filed by O	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State) (Zip)	Table I - Non-Derivative Secu		or Beneficially Owned			
1.Title of Security (Instr. 3)	any		Acquired 5. Amount of ed of (D) Securities 15) Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)			
Common Shares	05/15/2012	F 198 (1) D	\$ 15.02 28,824	D			

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)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	Date	7. Title and A Underlying S (Instr. 3 and	Securities	8. Price Derivat Securit (Instr. :
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Employee Stock Option (Right to Buy)	(2)					(3)	<u>(3)</u>	Common Shares	124,300	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Gudbranson Robert K ONE INVACARE WAY ELYRIA, OH 44035			Sr. VP and CFO	
Signatures				

/s/ Robert K. Gudbranson, by Kristofer K. Spreen, his attorney-in-fact pursuant to Power of 05/17/2012 Attorney, dated February 12, 2009, on file with the Commission

\*\*Signature of Reporting Person

# **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).
- The surrender of these shares is for tax withholding purposes in conjunction with the vesting of restricted shares held by the reporting (1) person.
- (2) 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 124,300 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

(3) between April 1, 2008 and September 2, 2011, at exercise prices between \$20.48 and \$25.79 per share, will expire between April 1, 2018 and September 2, 2021 and became or will become exercisable between March 31, 2009 and September 30, 2015.

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.

Date