## Edgar Filing: NEIGHBORCARE INC - Form 4

NEIGHBOR	CARE INC												
Form 4													
June 17, 200	5												
FORM	4									OMB A	PPROVAL		
	UNITED	STATES		ITIES A				NGE (	COMMISSION	OMB Number:	3235-0287		
Check thi								Expires:	January 31,				
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O							NERSHIP OF	Estimated a	2005 average				
Section 1	6.	SECURITIES								burden hours per			
Form 4 or Form 5										response			
obligation	<b>^</b>							-	ge Act of 1934,				
may cont			of the Inv	•		•	• •		f 1935 or Section	1			
See Instru 1(b).	iction	50(II)		estinen	ιC	ompan	y Act	01 19	40				
1(0).													
(Print or Type F	Responses)												
				Issuer Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer				
SMITH RO	Symbol	Symbol NEIGHBORCARE INC [NCRX]											
	NEIGHI						(Check all applicable)						
(Last)	(First) (N	/liddle)	3. Date of Earliest Transaction				(ener	ioni un applicacio)					
			(Month/Da	-					Director		6 Owner		
				6/15/2005					X Officer (give below)	er (specify			
PRATT STE	REET								Chief C	Operating Offic	cer		
(Street) 4. If				If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
Filed(Mont					(Month/Day/Year)					Applicable Line)			
									_X_ Form filed by C Form filed by M				
BALTIMOR	RE, MD 21202								Person		porting		
(City)	(State)	(Zip)	Table	I - Non-	Dei	rivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	lly Owned		
1.Title of	2. Transaction Dat	e 2A. Dee	emed	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executi	Execution Date, if TransactionAcquired (A) or						Form: Direct	Indirect			
(Instr. 3)		any (Month	Code Disposed of (D)					· ·	Indirect (I) Owner	Beneficial			
		(Monun	(Month/Day/Year)			(Instr. 8) (Instr. 3, 4 and 5)					(Instr. 4)		
							(A)		Reported				
							(A) or		Transaction(s)				
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	06/15/2005			F		2,258	D	<u>(1)</u>	32,333	D			

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

Stock

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)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
1	Director	10% Owner	Officer	Other					
SMITH ROBERT A NEIGHBORCARE, INC 601 EAST PRATT STREET BALTIMORE, MD 21202			Chief Operating Offi	icer					
Signatures									
John F. Gaither, Jr. on behalf o attorney	06/17/2005								
<u>**</u> Signature o	f Reporting F	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).
- Represents shares of restricted stock forfeited to fulfill tax obligations resulting for the vested shares granted pursuant to a benefit plan (1) approved in accordance with Rule 16b-3.

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.