Edgar Filing: Ferge Kristin A - Form 4

Ferge Kristin A

Ferge Kristin Form 4	A										
March 10, 20	10										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL	
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005	
subject to Section 10 Form 4 or	51A1E M 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSH SECURITIES							Estimated a burden hou response	verage	
Form 5	Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934								10000100	0.0	
	obligations may continue. Section 17(a) of the Public Utility Holding Company Act of 1935 or Section										
1(b).	cuon	()			- r	J					
(Print or Type R	esponses)										
1. Name and Address of Reporting Person _2. IssuerFerge Kristin ASymbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			-	dale Senior Living Inc. [BKD]				(Check all applicable)			
(Last)	(First) (M	(liddle)	3. Date of	Earliest Tra	ansaction			(ence	x un applicable)	
6737 W. WASHINGTON(Month/ 03/08/2STREET, SUITE 2300				th/Day/Year) 8/2010				Director10% Owner X Officer (give title Other (specify below) below) Executive Vice President			
(Street) 4. If			4. If Amer	. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mon				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
MILWAUK	EE, WI 53214							Person	fore than one Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)		on(A) or D (D) (Instr. 3,	4 and (A) or	d of 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	03/08/2010			Code V S(1)	Amount 281	(D) D	Price \$ 19.2		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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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							
	Director	10% Owner	Officer	Other				
Ferge Kristin A 6737 W. WASHINGTON STREET SUITE 2300 MILWAUKEE, WI 53214			Executive Vice President					
Signatures								
/s/ Chad C. White, By Power of Attorney		03/10/2010						
<u>**</u> Signature of Reporting Person		Date						
Evaloretion of Deen								

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 the sale of shares to satisfy tax withholding obligations due upon the vesting of restricted stock previously granted to the reporting person. The sale reported in this Form 4 was effected pursuant to a Rule 10b5-1 trading plan previously adopted by the reporting person.

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.