INVACARE CORP Form 5

February 12, 2016

## FORM 5

#### **OMB APPROVAL**

Check this no longer to Section	UNIT s box if subject	ED STATES	OMB Number: Expires:	3235-			
Form 4 or 5 obligation may continue See Instruction 1(b).	Form Annual Property of the Control	d pursuant to 17(a) of the	CATEMENT OF CHANGES IN BEI OWNERSHIP OF SECURITIES  Section 16(a) of the Securities Exchan Public Utility Holding Company Act of 19 of the Investment Company Act of 19	Estimated a burden hou response	_	1.0	
	Address of Repo	_	Issuer Name and Ticker or Trading     Symbol     INVACARE CORP [IVC]     Statement for Issuer's Fiscal Year Ended	5. Relationship of I Issuer (Check	Reporting Pers		
, ,	CARE WAY	, ,	(Month/Day/Year) 12/31/2015	_X_ Director Officer (give t		Owner er (specify	
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi	nt/Group Repo		
ELYRIA,Â	OHÂ 44035			_X_ Form Filed by C Form Filed by M Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities A	cquired, Disposed of,	or Beneficial	ly Owned	l
1 Title of	2 Transactio	n Date 24 Dee	emed 3 4 Securities	5 Amount of	Ownership	7 Nature	e of

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Secur Acquired Disposed (Instr. 3,	d (A) od of (D) 4 and (A) or	))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Shares	Â	Â	Â	Â	Â	Â	4,254 <u>(1)</u>	D	Â

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

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SEC 2270 (9-02)

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Date	Underlying Securities	Derivat

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Derivative Securities Acquired A) or Disposed Of (D) Instr. 3,		4)	Securit (Instr. :
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Stock Option (Right to Buy)	Â	Â	Â	Â	Â	Â	(3)	(3)	Common Shares	8,977	Â	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
•	Director	10% Owner	Officer	Other				
MERRIMAN MICHAEL J ONE INVACARE WAY ELYRIA, OH 44035	ÂΧ	Â	Â	Â				

## **Signatures**

/s/ Michael J. Merriman, Jr., by Kristofer K. Spreen, his attorney-in-fact, pursuant to Power of Attorney, dated May 15, 2014, on file with the Commission

02/12/2016

\*\*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) The total number of common shares represents restricted stock units issued pursuant to the Invacare Corporation 2013 Equity Compensation Plan. These restricted stock units vest in full on May 15, 2018 after a three-year "cliff" vesting period.
- (2) No transaction is being reported on this line. Reported on a previously filed Form 3, Form 4, or Form 5.

(3) The reporting person holds previously reported options to buy 8,977 Common Shares (with tandem tax withholding rights) under the Invacare Corporation 2013 Equity Compensation Plan, granted in reliance upon the exemption provided by Rule 16b-3. All options were granted on May 15, 2014, at an exercise price of \$16.71 per share, will expire on May 15, 2024, and became or will become exercisable between March 31, 2015 and March 31, 2018.

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.

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