INVACARE CORP

Form 5 February 13, 2007

FORM	15				OMB AI	PPROV	AL
		ED STATES	S SECURITIES AND EXCHANGE	COMMISSION	OMB Number:	3235	-0362
Check this	subject	Washington, D.C. 20549					ry 31, 2005
to Section Form 4 or 5 obligation may continuous	Form A	ANNUAL ST	Estimated average burden hours per response		1.0		
See Instruction 1(b). Form 3 Horn Reported Form 4 Transaction Reported	Filed Poldings Section	17(a) of the	Section 16(a) of the Securities Exchange Public Utility Holding Company Act of of the Investment Company Act of 19	of 1935 or Section	ı		
	Address of Repo ERNADINE	orting Person *	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of l Issuer	Reporting Pers	son(s) to	
(Last)	(First)	(Middle)	INVACARE CORP [IVC] 3. Statement for Issuer's Fiscal Year Ended	(Check	all applicable	e)	

ONE INVACARE WAY	(Month/Day/Year) 12/31/2006	X Director Officer (give title below)	Other (specify below)	
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Reporting (check applicable line)		
	1 ned(wond/Day/1ear)			

ELYRIA, OHÂ 44035

X Form Filed by One Reporting Person Form Filed by More than One Reporting

(City)	(State)	Zip) Table	e I - Non-Deri	vative Sec	uritie	s Acqui	red, Disposed o	f, or Beneficial	ly Owned
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. Securi Acquired Disposed (Instr. 3,	l (A) o l of (D)	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	10,883	D	Â

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.

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	Deriva

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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)	es 1	Year)	(Instr. 3 and 4	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	(2)	(2)	Common Shares	39,437	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other		
HEALY BERNADINE ONE INVACARE WAY ELYRIA, OH 44035	ÂΧ	Â	Â	Â		

Signatures

/s/ Bernadine P.
Healy

**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 39,437 Common Shares (with tandem tax withholding rights) under the Invacare Corporation 1994 Performance Plan and the Invacare Corporation 2003 Performance Plan, granted in reliance upon the
- (2) exemption provided by Rule 16b-3. All options were granted between March 2, 1999 and March 8, 2006, at exercise prices between \$16.03 to \$47.01 per share, will expire between March 2, 2009 and March 8, 2016 and became or will become exercisable between March 31, 2000 and March 31, 2010.

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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