Edgar Filing: MATRIA HEALTHCARE INC - Form 4/A

MATRIA HEALTHCARE INC Form 4/A May 05, 2006	Ū	
FORM 4 UNITED STATES	S SECURITIES AND EXCHANGE (Washington, D.C. 20549	Number: 3235-0287
if no longer subject to Section 16. Form 4 or Form 5 Eiled pursuant to 5	Estimated average burden hours per response 0.5	
obligations may continue Section 17(a) of the	Section 16(a) of the Securities Exchang Public Utility Holding Company Act o of the Investment Company Act of 194	f 1935 or Section
(Print or Type Responses)		
1. Name and Address of Reporting Person <u>*</u> MCCAW ROBERTA L	2. Issuer Name and Ticker or Trading Symbol MATRIA HEALTHCARE INC [MATR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last) (First) (Middle) 1850 PARKWAY PLACE	3. Date of Earliest Transaction (Month/Day/Year) 04/21/2006	Director 10% Owner XOfficer (give title Other (specify below) below) SVP & Secretary
(Street) MARIETTA, GA 30067	4. If Amendment, Date Original Filed(Month/Day/Year) 04/25/2006	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person
(City) (State) (Zip)	Table I - Non-Derivative Securities Acc	uired, Disposed of, or Beneficially Owned
(Instr. 3) any		5. Amount of Securities6. Ownership Form: Direct7. Nature of IndirectBeneficially Owned(D) or Indirect (I)Beneficial OwnershipFollowing Following Transaction(s) (Instr. 3 and 4)(Instr. 4)
Common Stock (1) 04/21/2006	A 5,000 A \$0	19,087 D

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

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

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. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Da (Month/Day/Y	te	7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (right to buy) (2)	\$ 12.37	02/19/2002		J	2,356	02/19/2006	02/19/2012	Common Stock	2,356
Option (right to buy) (3)	\$ 5.84	03/12/2003		J	6,212	03/12/2008	03/12/2013	Common Stock	6,212
Option (right to buy) (4)	\$ 13.58	02/15/2006		J	15,185	12/18/2008	12/18/2013	Common Stock	2,439
Option (right to buy) (5)	\$ 16.79	02/16/2006		J	7,199	08/11/2009	08/11/2014	Common Stock	1,801
Option (right to buy) <u>(6)</u>	\$ 29.97	06/08/2005		J	9,000	06/08/2010	06/08/2015	Common Stock	9,000
Option (right to buy) <u>(7)</u>	\$ 34.67	11/08/2005		J	15,000	11/08/2008	11/08/2015	Common Stock	15,000

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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MCCAW ROBERTA L 1850 PARKWAY PLACE MARIETTA, GA 30067			SVP & Secretary	
Cianaturaa				

Signatures

Roberta L.	05/05/2006
McCaw	05/05/2000

<u>**</u>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) Grant of restricted stock, which will vest in equal one-third increments over a period of three years upon the achievement of certain performance criteria.
- (2) Granted on 02/19/2002 with full vesting to occur no later than 4 years from 02/19/2002 and no sooner than 2 years from 02/19/2002 with acceleration based on Matria's performance.
- (3) Granted on 03/12/2003 and vests 20% per annum thereafter.
- (4) Granted on 12/18/2003 and vests 20% per annum thereafter.
- (5) Granted on 08/11/2004 and vests 20% per annum thereafter.
- (6) Granted on 06/08/2005 and vests 20% per annum thereafter.
- (7) Granted on 11/08/2005 and vests 33 1/3% per annum thereafter.

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.