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Check this box if no longer subject to SECURITIES Section 16. SECURITIES									3235-0287 January 31, 2005 d average ours per
(Print or Type 1. Name and J WEIL JOH	Symbol ALLIE	er Name and D HEALT UCTS INC	HCARE	l	ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 200 N. BRO	(First) (Middl OADWAY, STE 825	e) 3. Date of	of Earliest Tra Day/Year)				X Director Officer (giv below)	ve title (below)	10% Owner Other (specify
ST. LOUIS		. If Amendment, Date Original iled(Month/Day/Year)				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)	Tal	le I - Non-D	erivative (Secur	ities A.c.	quired, Disposed	of or Benefic	ially Owned
1.Title of Security (Instr. 3)	any	. Deemed ecution Date, if	3. Transactior Code (Instr. 8)	4. Securiti	les Ac posed	quired of (D)	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	05/12/2005			25,000	(D) A	\$ 5.25	2,983,914	I	Limited Partnership (1)
Common							4,000	Ι	IRA
Common							10,000	I	Son (2)
Common							26,300	Ι	Spouse (2)
Common							9,250	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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)

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. Transactio Code (Instr. 8)	5. orfNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option (right to buy)	\$ 6.841					11/12/2005(4)	11/12/2014	Common Stock	1,000
Option (right to buy)	\$ 7					<u>(3)</u>	08/04/2007	Common Stock	10,000
Option (right to buy)	\$ 1.88					(3)	04/01/2009	Common Stock	1,250
Option (right to buy)	\$ 7.63					11/17/1998(4)	11/17/2007	Common Stock	1,000
Option (right to buy)	\$ 7.25					02/09/1999(4)	02/09/2008	Common Stock	500
Option (right to buy)	\$ 3.9					11/14/2004(4)	11/14/2013	Common Stock	1,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
r U	Director	10% Owner	Officer	Other			
WEIL JOHN D 200 N. BROADWAY STE 825 ST. LOUIS, MO 63102	Х	Х					

8. De Se (Ir

Signatures

John D. Weil

05/12/2005

<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).

Shares are held by Woodbourne Partners, L.P. of which the Reporting Person is the sole general partner. Number of shares does not include an aggregate of 9,000 additional shares of common stock held in one Individual Retirement Account maintained for the benefit of

- (1) Include an aggregate of 9,000 additional shares of common stock held in one individual reductine recount maintained for the benefit of associate of such person). The Reporting Person disclaims any ownership or economic interest in the shares held in such IRA account.
- (2) Filer disclaims any economic benefit in shares.
- (3) Options may not be exercised for a period of two years from the date of the grant and thereafter become exercisable on a cumulative basis in 25% increments beginning on the second anniversary of the date of grant and concluding on the fifth anniversary thereof
- (4) Options may not be exercised for a period of one year from the date of the grant and thereafter are exercisable in full.

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.