Edgar Filing: Gaines Kristin Sallee - Form 4

Gaines Kristi Form 4	in Sallee											
February 06,												
FORM	SECUR	ITIES A	ND EXC	HAN	OMMISSION		PROVAL					
Check this box					hington,			Number:	3235-0287			
if no long subject to Section 1 Form 4 or	ger STAT 6.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									January 31, 2005 verage 's per	
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed ¹⁵ Section	^	of the I	Public Ut		ing Com	pany	Act of	Act of 1934, 1935 or Section)	response	0.5	
(Print or Type R	Responses)											
1. Name and Address of Reporting Person <u>*</u> Gaines Kristin Sallee			Symbol	Name and		Frading	D	5. Relationship of Reporting Person(s) to Issuer				
					NAL HEA TORS INC				(Check all applicable)			
				3. Date of (Month/Da 02/04/20	-	ansaction			Director 10% Owner X Officer (give title Other (specify below) below) Chief Credit Officer			
					ndment, Dat th/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			
(City)	(State)	(Z		T -1-1-	I N. D		•		Person	D	0	
1.Title of Security (Instr. 3)	2. Transaction	(Euc) (Euc) Tabl . Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)			3. Transactio Code (Instr. 8)	4. Securit	ies Ac sposed	quired of (D)	 iired, Disposed of, 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) 	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock	02/04/2012				Code V M	Amount 16,667	(D) A	Price \$ 46.22	(Instr. 3 and 4) 41,870 (1)	D		
Common Stock	02/04/2012				F	15,135	D		26,735	D		
Common Stock (restricted Stock Award)									0 (1)	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)

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)	orDeri Secu Acqu or D (D)	urities uired (A) isposed of r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		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
Stock Options (Right to Buy)	\$ 46.22	02/04/2012		М		16,667	02/25/2011	02/25/2016	Common Stock	16,667
Stock Options (Right to Buy)	\$ 29.24						02/04/2011	02/04/2013	Nhi Common Stock	2,500
Stock Options (Right to Buy)	\$ 29.24						02/04/2012	02/04/2013	Nhi Common Stock	2,500
Stock Options (Right to Buy)	\$ 46.22						02/25/2012	02/25/2016	Common Stock	16,667
Stock Options (Right to Buy)	\$ 34.48						03/02/2012	03/02/2020	Nhi Common Stock	16,668
Stock Options (Right to Buy)	\$ 46.22						02/25/2013	02/25/2016	Common Stock	16,666

Reporting Owners

Reporting Owner Name / Address

Relationships

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Director 10% Owner Officer

Other

Gaines Kristin Sallee 222 ROBERT ROSE DRIVE MURFREESBORO, TN 37129

Chief Credit Officer

Signatures

/s/ Kristin S. Gaines

02/05/2012

Date

<u>**</u>Signature of Reporting Person

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) 500 Shares of Common Stock (Restricted Stock Award) vested on February 4, 2012, and were therefore moved to the Common Stock total.

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.