#### LIFEPOINT HOSPITALS, INC. Form 3 August 07, 2006 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31,

### **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Expires:

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> GILBERT PAUL D			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol LIFEPOINT HOSPITALS, INC. [LPNT]				
(Last)	(First)	(Middle)	08/07/2006	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
103 POWELL COURT, SUITE 200				(Check all applicable)				
BRENTWO	(Street) DD, TNÂ	37027		Director10% Owner XOfficerOther (give title below) (specify below) SVP and General Counsel		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 - N	Non-Derivat	ive Securiti	es Bei	neficially Owned	
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	•	
Common Sto	ock		2,200		D	Â		
Reminder: Repo owned directly of	-	ate line for ea	ch class of securities benefic	<sup>ially</sup> S	EC 1473 (7-02)	)		
Ĵ	Person inform require	ation conta ed to respo	oond to the collection of ined in this form are not nd unless the form displ //B control number.					

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership
	(Month/Day/Year)	Derivative Security (Instr. 4) Title	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D)	(Instr. 5)

### Edgar Filing: LIFEPOINT HOSPITALS, INC. - Form 3

Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Add	ress	Relationships					
	Director	10% Owner	Officer	Other			
GILBERT PAUL D 103 POWELL COURT SUITE 200 BRENTWOOD, TN 3702	Â 27	Â	SVP and General Counsel	Â			
Signatures							
Paul D Gilbert 08	8/07/2006						
<u>**</u> Signature of	Date						

Reporting Person

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 5(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).

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.