## Edgar Filing: MOORE A BRUCE JR - Form 4

MOORE A I Form 4												
January 04, 2005 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). January 04, 2005 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							OMB Number: Expires: Estimated a burden hou response	•				
(Print or Type ]	Responses)											
1. Name and Address of Reporting Person <u>*</u> MOORE A BRUCE JR			2. Issuer Name <b>and</b> Ticker or Trading Symbol HCA INC/TN [(HCA)]					ıg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (I	Middle)	3. Date of Earliest Transaction					Director 10% Owner				
ONE PARK PLAZA			(Month/Day/Year) 01/01/2005						Officer (give title Other (specify below) below) COO - Outpatient Services			
				If Amendment, Date Original led(Month/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
(City)	(State)	(Zip)	Tabl	e I - No	n-D	erivative (	Secur	ities Aca	Person uired, Disposed of	or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ned	3. Transa Code (Instr.	actio 8)	4. Securi n(A) or Di (Instr. 3,	ties A spose	cquired d 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	
Common Stock	12/31/2004			J <u>(1)</u>	V	705	A	\$0	47,710	D		
Common Stock	01/01/2005			F		355	D	\$ 39.96	47,355	D		
Common Stock									2,981	Ι	By 401(k)	
Common Stock									1,811	Ι	By Children	

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

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative		· · · ·		Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired			``	,		Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					· · · ·						
					4, and 5)						
									Amount		
						-			or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
				cout v	$(\mathbf{D})$				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MOORE A BRUCE JR ONE PARK PLAZA NASHVILLE, TN 37203			COO - Outpatient Services					
Signatures								
By: /s/ John M. Franck II, Attorney-in-Fact		01/	04/2005					

<u>\*\*Signature of Reporting Person</u>
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).

Date

(1) Ongoing acquisition of common stock from 1/1/2004 to 12/31/2004 under the HCA Employee Stock Purchase Plan and including dividend reinvestment of shares.

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.