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NATIONAL HEALTH INVESTORS Form 4 February 27, 2014	INC				
FORM 4 UNITED STATE			OMB AF	PROVAL	
UNITED STATE	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549		OMB Number:	3235-0287	
Check this box if no longer			Expires:	January 31, 2005	
subject to Section 16. Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES				
Form 5 Filed pursuant to 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	response	0.5	
(Print or Type Responses)					
1. Name and Address of Reporting Person <u>*</u> Gaines Kristin Sallee	2. Issuer Name and Ticker or Trading Symbol NATIONAL HEALTH INVESTORS INC [NHI]	5. Relationship of I Issuer (Check	Reporting Pers		
(Last) (First) (Middle) 222 ROBERT ROSE DRIVE	3. Date of Earliest Transaction (Month/Day/Year) 02/25/2014	Director X Officer (give t below) Chief		Owner er (specify	
(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi Applicable Line) _X_ Form filed by O			
MURFREESBORO, TN 37129		Form filed by Mo			
(City) (State) (Zip)	Table I - Non-Derivative Securities Acc	uired. Disposed of.	or Beneficial	lv Owned	
	emed 3. 4. Securities	5. Amount of 6 Securities F Beneficially (Owned F	5. Ownership Form: Direct D) or ndirect (I) Instr. 4)	-	
Common Stock		21,264 I)		

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)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exerci Expiration Dat (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
Stock Options (Right to Buy) 2-25-14	\$ 61.31	02/25/2014		A	16,666	02/25/2014	02/25/2019	Common Stock	16,666
Stock Options (Right to Buy) 2-25-14	\$ 61.31	02/25/2014		A	16,666	02/25/2015	02/25/2019	Common Stock	16,666
Stock Options (Right to Buy) 2-25-14	\$ 61.31	02/25/2014		А	16,668	02/25/2016	02/25/2019	Common Stock	16,668
Stock Options (Right to Buy)	\$ 46.22					02/25/2013	02/25/2016	Common Stock	16,668
Stock Options (Right to Buy)	\$ 47.52					02/21/2013	02/21/2017	Common Stock	16,666
Stock Options (Right to Buy)	\$ 47.52					02/21/2014	02/21/2017	Common Stock	16,668
Stock Options (Right to Buy)	\$ 64.49					02/25/2013	02/25/2018	Nhi Common Stock	16,666
Stock Options (Right to Buy)	\$ 64.49					02/25/2014	02/25/2018	Nhi Common Stock	16,666
	\$ 64.49					02/25/2015	02/25/2018		16,668

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Stock Options (Right to Buy)

Reporting Owners

Reporting Owner Name / Add	ress	Relationships				
1 0	Director	10% Owner	Officer	Other		
Gaines Kristin Sallee 222 ROBERT ROSE DRIV MURFREESBORO, TN 37	_		Chief Credit Officer			
Signatures						
/s/ Kristin S. Gaines	02/26/2014					
<u>**</u> Signature of Reporting Person	Date					
Explanation of	Respons	ses:				

* 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).

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.

Nhi Common Stock