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NATIONAL HEALTHCARE CORP

Form 4

October 03, 2008

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL

Number: 3235-0287

January 31,

Expires: 2005
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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Ad DANIEL DO | ldress of Reporting Po NALD K | Symbol | r Name and Ticker or Trading | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|---|---|---|---|--|--|--|
| (Last) (First) (Middle) 100 VINE ST., SUITE 1200 | | 3. Date o (Month/E 10/03/2 | • | Director 10% Owner Officer (give title Other (specify below) Sr. Vice President, Controller | | | |
| | (Street) | | endment, Date Original nth/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MURFREES | BORO, TN 3713 | 0 | | Form filed by More than One Reporting Person | | | |
| (City) | (State) (Z | Zip) Tabl | le I - Non-Derivative Securities Ac | quired, Disposed of, or Beneficially Owned | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. 3, 4 and 5) | Securities Ownership Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4) | | | |
| Shares of Common Stock | | | Code v Alliount (D) Frice | 199,240 I Partnership | | | |
| Shares of Series A Convertible Preferred Stock | 10/03/2008 | | P 1,000 A \$ 13.54 | 141,073 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 (9-02)

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6. Date Exercisable and

7. Title and Amount of

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

3. Transaction Date 3A. Deemed

| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | TransactionNumber Code of (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | Underlying Securities (Instr. 3 and 4) | |
|--------------------------------------|---|------------------|---|---|---------|---------------------|--------------------|--|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option-"Right | \$ 20.9 | | | | | 09/28/2008 | 03/23/2009 | Common Stock | 15,687 |

Reporting Owners

2.

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

DANIEL DONALD K 100 VINE ST., SUITE 1200 MURFREESBORO, TN 37130

Sr. Vice President, Controller

Signatures

1. Title of

to Buy"

Donald K. Daniel 10/03/2008

**Signature of Date
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).

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.

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