Gaines Kristin Sallee Form 4 March 04, 2010

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per

response... 0.5

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

obligations

may continue.

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Gaines Kristin Sallee Issuer Symbol NATIONAL HEALTH (Check all applicable) **INVESTORS INC [NHI]** (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X_ Officer (give title Other (specify (Month/Day/Year) below) 222 ROBERT ROSE DRIVE 03/02/2010 Chief Credit Officer (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting MURFREESBORO, TN 37129 Person

(City)	(State) (Z	Zip) Table	I - Non-De	erivative S	ecuriti	ies Acq	quired, Disposed	of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	l (A) or l 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 Beneficial Ownership (Instr. 4)
Common Stock					(-)		2,503	D	
Common Stock (restricted Stock Award)							2,350	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form

Edgar Filing: Gaines Kristin Sallee - Form 4

displays a currently valid OMB control number.

$\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		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)	\$ 34.48	03/02/2010		A	16,666	03/02/2010	03/02/2020	Nhi Common Stock	16,666
Stock Options (Right to Buy)	\$ 34.48	03/02/2010		A	16,666	03/02/2011	03/02/2020	Nhi Common Stock	16,666
Stock Options (Right to Buy)	\$ 34.48	03/02/2010		A	16,668	03/02/2012	03/02/2020	Nhi Common Stock	16,668
Stock Options (Right to Buy)	\$ 29.24					02/04/2009	02/04/2013	Nhi Common Stock	2,500
Stock Options (Right to Buy)	\$ 29.24					02/04/2010	02/04/2013	Nhi Common Stock	2,500
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	\$ 25.29					02/25/2010	02/25/2013	Nhi Common Stock	16,666

Buy)

Stock **Options**

\$ 25.29

02/25/2011 02/25/2013 Common 16,668

Nhi Stock

(Right to Buy)

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

Gaines Kristin Sallee 222 ROBERT ROSE DRIVE MURFREESBORO, TN 37129

Chief Credit Officer

Signatures

Kristin S. 03/04/2010 Gaines

**Signature of Date Reporting Person

Explanation of Responses:

If the form is filed by more than one reporting person, see Instruction 4(b)(v).

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.

Reporting Owners 3

Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).