Edgar Filing: Valine Yousef A. - Form 4

| Valine Youse Form 4 | | | | | | | | | | | |
|---|---|-----------------|---|--------------------------|------------------------|--|-----------------------------------|--|--|--|--|
| February 15, 2013 FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | 3235-028 | | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction | | | | | | | e Act of 1934, 1935 or Section | Expires:January 312005Estimated averageburden hours perresponse0.5 | | | |
| (Print or Type R | | D * | | | | | | 5 Deletionship of | Dana dina Dana | (-) +- | |
| 1. Name and Address of Reporting Person * Valine Yousef A. | | | 2. Issuer Name and Ticker or Trading Symbol FIRST HORIZON NATIONAL CORP [FHN] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) 165 MADISON AVENUE | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/14/2013 | | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) EVP & Chief Risk Officer | | | |
| MEMPHIS, | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 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 | e I - Non-D | erivative | Secur | ities Aca | uired, Disposed of | or Beneficial | lv Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Executio any | ned | 3. Transactic Code | 4. Securi | ties Ad ispose | cquired d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial | |
| Common Stock | 02/14/2013 | | | Code V F | Amount 1,005 (1) | or (D) D | Price \$ 10.79 | (Instr. 3 and 4) 62,127 | D | | |
| Common Stock | | | | | | | | 2,478 | Ι | 401(k) | |

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

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 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | Date | Under Secur | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|----------------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|--------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| Valine Yousef A. 165 MADISON AVENUE MEMPHIS, TN 38103 | | | EVP & Chief Risk Officer | | | | |
| Signatures | | | | | | | |
| /s/ John A. Niemoeller, attorney-in-fact | | 02/15/20 | 13 | | | | |
| **Signature of Reporting Person | | Date | | | | | |

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).
- (1) Reflects mandatory withholding of shares to pay required withholding taxes associated with vesting of restricted stock award granted previously

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.