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NATIONAL HEALTH INVESTORS INC

Form 4

February 24, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION					OMB APPROVAL				
	UNITED S	STATES	S SECURITIE Washing			OMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to		IENT O	NT OF CHANGES IN BENEFICIAL OWNERSHIP OF				Expires: Estimated a	January 31, 2005 verage	
Section 16. Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,				burden hour response	s per 0.5				
obligations may continue. See Instruction 1(b). Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type Respo	onses)								
1. Name and Address of Reporting Person * ADAMS W ANDREW			2. Issuer Name and Ticker or Trading Symbol NATIONAL HEALTH INVESTORS INC [NHI]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)		Middle)	3. Date of Earlie (Month/Day/Ye.		ion	_X_ Director Officer (give tibelow)		Owner (specify	
222 ROBERT R	ROSE DRIVE		02/20/2015			below)	below)		
	Filed(Month/Day/Year) Applicable Line) _X_ Form filed by C			oint/Group Filing(Check One Reporting Person fore than One Reporting					
MURFREESBO	ORO, TN 3712	29				Person	ore man One Rep	oorung	
(City)	(State)	(Zip)	Table I - N	on-Deriva	tive Securities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	Year) Ex	ecution Date, if	3. Transaction Code (Instr. 8)	4. Securities on Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	

1. Title of Security 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6.	7. Nature of
(Instr. 3) (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Ownership	Indirect
	Beneficial
(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned Direct (D)	Ownership
	(Instr. 4)
Reported (I)	
(A) Transaction(s) (Instr. 4)	
or (Instr. 3 and 4)	
Code V Amount (D) Price (Institution 1)	
	Common
Common Stock 9,707 I	Stock
- held by Spouse	held by
	Spouse
	Spouse
Common Stock	
By Amk, L.p. 732,784 D	
Common Stock	
By Springland 44,000 D	
Ventures, L.p.	
Common Stock 34,140 D	

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Adams Non Exempt Trust			
Common Stock by W. Andrew Adams Exempt Trust	7,411	D	
Common Stock By Adams Family Foundation II	222,307	I	Trustee
Common Stock by EMA, L.P.	341,802	I	Trustee
Common Stock by JMA Grandchildren's Trust	12,635	I	Trustee

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.

SEC 1474

(9-02)

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

		, 0 / 1		, .		,			
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 or Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercise Expiration Date (Month/Day/Y	e	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)	\$ 72.11	02/20/2015		A	20,000	02/20/2015	02/20/2020	Common Stock	20,000
Stock Options (Right to Buy) 2-25-14	\$ 61.31					02/25/2014	02/25/2019	Common Stock	15,000
2 20 1.	\$ 64.49					02/25/2013	02/25/2018		15,000

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Stock Options (Right to Buy)				Common Stock	
Stock Options (Right to Buy)	\$ 47.52	02/21/2012	02/21/2017	Common Stock	15,000
Stock Options (Right to Buy)	\$ 45.58	02/22/2011	02/22/2016	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 8	Director	10% Owner	Officer	Other		
ADAMS W ANDREW 222 ROBERT ROSE DRIVE MURFREESBORO, TN 37129	X					

Signatures

/s/W. Andrew
Adams

**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).

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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