HASSAN EMIL E Form 4

FORM 4

May 06, 2009

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

0.5

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

SECURITIES

burden hours per response...

See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(City)

Stock

(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 HASSAN EMIL E Issuer Symbol NATIONAL HEALTHCARE CORP (Check all applicable) [NHC] _X__ Director (Last) (First) (Middle) 3. Date of Earliest Transaction 10% Owner Other (specify Officer (give title (Month/Day/Year) below) 1704 IRBY LANE 05/05/2009

(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 37127

(State)

(Zip)

Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

		Tubic I	1 Tion Berryalive Securities required, Disposed 61, 61 Beneficiary 6 whea				
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3.	4. Securities on Acquired (A) or	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)	(Month/Day/Tear)	any	Code	Disposed of (D)	Beneficially	Form: Direct	Beneficial
(111011110)		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	(D) or	Ownership
					Following	Indirect (I)	(Instr. 4)
				(A)	Reported	(Instr. 4)	
				or	Transaction(s) (Instr. 3 and 4)		
			Code V	Amount (D) Price	(Instr. 5 und 1)		
Shares of							
Common					21,000	D	
Stock							
Shares of							
Series A							
Convertible					17,000	D	
Preferred							

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)

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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. Transaction Code (Instr. 8)	5. Number of orDerivative Securities 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
Option to Purchase Common Stock	\$ 32.01					05/03/2005	05/02/2010	Common Stock	15,000
Option to Purchase Common Stock	\$ 44.25					05/03/2006	05/02/2011	Common Stock	15,000
Option to Purchase Common Stock	\$ 52.5					04/24/2007	04/23/2012	Common Stock	15,000
Option to Purchase Common Stock	\$ 51.5					05/01/2008	05/01/2013	Common Stock	15,000
Option to Purchase Common Stock	\$ 37.7	05/05/2009		A	15,000	05/05/2009	05/04/2014	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 0	Director	10% Owner	Officer	Other		
HASSAN EMIL E						
1704 IRBY LANE	X					
MURFREESBORO, TN 37127						

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Signatures

Emil E. Hassan by Ann S. Benson, POA 05/06/2009

**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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