

Edgar Filing: NATIONAL HEALTH INVESTORS INC - Form 3

NATIONAL HEALTH INVESTORS INC

Form 3

February 10, 2003

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 WASHINGTON, D.C. 20549  
 FORM 3

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

1. Name and Address of Reporting Person  
 Swafford, Charlotte A.  
 915 E. Main Street  
 Murfreesboro, TN 37130
2. Date of Event Requiring Statement (Month/Day/Year)  
 February 10, 2003
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Issuer Name and Ticker or Trading Symbol  
 National Health Investors, Inc.  
 NHI
5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  
 Director  10% Owner  Officer (give title below)  Other  
 (specify below)  
 Treasurer
6. If Amendment, Date of Original (Month/Day/Year)
7. Individual or Joint/Group Filing (Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

Table I -- Non-Derivative Securities Beneficially Owned

| 1. Title of Security                         | 2. Amount of Securities Beneficially Owned | 3. Ownership Form: Direct (D) or Indirect (I) | 4. Nature of Beneficial |
|--|--|---|-------------------------|
| Common Stock in my name and my spouse's name | 104,785                                    | I   | Partnership             |

Table II -- Derivative Securities Beneficially Owned

| 1. Title of Derivative Security        | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Underlying Securities | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security |
|--|--|--|--|--|
| Employee Stock Option - "Right to Buy" | 10/26/99   10/25/05                                      | Common Stock<br>Title                        | 10,000   \$14.50                                       | D  |

Explanation of Responses:

Edgar Filing: NATIONAL HEALTH INVESTORS INC - Form 3

SIGNATURE OF REPORTING PERSON

Charlotte A. Swafford

DATE

February 10, 2003