POWELL JULIA W

Form 4 June 16, 2010

FORM 4

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

OMB Number: 3235-0287

OMB APPROVAL

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

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

2. Issuer Name and Ticker or Trading

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

POWELL JULIA W		Symbol			Issuer					
			NATION. [NHC]	NATIONAL HEALTHCARE CORP [NHC]				(Check all applicable)		
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)			Director 10% Owner Other (specify below)			
3712 LASCASSAS PIKE			06/15/201	06/15/2010			Sr. V.P., Patient Services			
	(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Filed(Month	Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person			
MURFREESE	BORO, TN 3	37130					Form filed by I Person	More than One Re	porting	
(City)	(State)	(Zip)	Table I	- Non-Der	ivative Se	curities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3) Shares of Common Stock in my name and my	2. Transactic (Month/Day/	any	Deemed cution Date, if nth/Day/Year)	3. Transaction Code (Instr. 8)	Disposed (Instr. 3,	(A) or d of (D) 4 and 5) (A) or	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)	
spouse's name Shares of Series A Convertible Preferred Stock							83,010	D		

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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	2.	3. Transaction Date		4. 5. Number		6. Date Exercisable and		7. Title and Amount of	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		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	\$ 35.37	06/15/2010		A	8,000 (1)	05/16/2015	06/15/2015	Common Stock	8,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
POWELL JULIA W			Sr. V.P.,				
3712 LASCASSAS PIKE			Patient				
MURFREESBORO, TN 37130			Services				

Signatures

Julia W. Powell 06/16/2010

**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) These stock options were granted pursuant to the Company's 2010 Omnibus Equity Incentive Plan. The grant and exercise of these stock options are exempt from Section 16(b) pursuant to Rule 16b-3(d).

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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