

Edgar Filing: NATIONAL HEALTH INVESTORS INC - Form 5

NATIONAL HEALTH INVESTORS INC

Form 5

January 16, 2003

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 WASHINGTON, D.C. 20549
 FORM 5

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

() Check box if no longer subject to Section 16.

Form 4 or Form 5 obligations may continue. See Instructions 1(b).

() Form 3 Holdings Reported

() Form 4 Transactions Reported

1. Name and Address of Reporting Person

Adams, Robert G.
 2217 Battleground Drive
 Murfreesboro, TN 37129

2. Issuer Name and Ticker or Trading Symbol

National Health Investors, Inc.
 NHI

3. IRS or Social Security Number of Reporting Person (Voluntary)

4. Statement for Month/Year

December 31, 2002

5. If Amendment, Date of Original (Month/Year)

6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

() Director () 10% Owner (X) Officer (give title below) () Other
 (specify below)

Vice President

7. Individual or Joint/Group Reporting (Check Applicable Line)

(X) Form filed by One Reporting Person

() Form filed by More than One Reporting Person

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

1. Title of Security	2. Transaction Date	3. Code	4. Securities Acquired (A) or Disposed of (D) Amount	A/ D	Price	5. Amount of Securities Beneficially Owned at End of Year
Common Stock						248,906
Common Stock						32,826
Common Stock						20,000
Common Stock						71,994

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Derivative Security	2. Conversion or Exercise Date of Derivative	3. Transaction Date	4. Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities	8. Percentage of Total Underlying Securities
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tive Secu rity				Amount	A/ D	Exer- cisa- ble	ation Date	Title and Number of Shares
Option to purchase comm on stock	\$14.50					10/26 /99	10/25 /05	Common Stock 20,000

Explanation of Responses:
SIGNATURE OF REPORTING PERSON
Robert G. Adams