Edgar Filing: Finley Sara - Form 4

Finley Sara

Form 4	10										
March 22, 20									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or				GES IN I SECUR		ICIA	LOW	NERSHIP OF	Expires: Estimated a burden hou response	0	
Form 5 obligation may cont <i>See</i> Instru 1(b).	inue. Section 17	(a) of the	Public Ut		ling Con	npany	y Act of	e Act of 1934, f 1935 or Section 40			
(Print or Type F	Responses)										
			2. Issuer Name and Ticker or Trading Symbol TIVITY HEALTH, INC. [TVTY]				ng	5. Relationship of Reporting Person(s) to Issuer			
							ГҮ]	(Check all applicable)			
(M			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 03/20/2019				X_ Director 10% Owner Officer (give titleOther (specify below)below)			
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
FRANKLIN	I, TN 37067							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execution any		3. Transactio Code (Instr. 8)	4. Securi n(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/20/2019			Code V P	Amount 2,000	(D) A	Price \$ 17.25	4,876	D		

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.

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

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: Finley Sara - Form 4

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. orNumbe	6. Date Exer r Expiration D		7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(wond, Day Teat)	any (Month/Day/Year)	Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Underlying Securities (Instr. 3 and 4)	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (I	D) Date Exercisable	*	Title Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director 10% Owner		Officer	Other				
Finley Sara 701 COOL SPRINGS BLVD FRANKLIN, TN 37067	Х							
Signatures								
/s/ Mary Flipse by power of att Finley	Sara	03/22/2019						
**Signature of Reporting P		Date						
Evaloretion of Deenenees.								

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.