HCA INC/TN Form 4 July 06, 2005

## FORM 4

#### OMB APPROVAL

# 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 Expires: January 31, 2005

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * SHALLCROSS RICHARD J |                |              | 2. Issuer Name a<br>Symbol<br>HCA INC/TN | and Ticker or Trading [(HCA)] | 5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)                             |  |              |  |
|--|----------------|--------------|--|-------------------------------|--|--|--------------|--|
| (Last)   | (First)        | (Middle)     | 3. Date of Earlies                       | t Transaction                 | (CIII  | сек ин аррнеиот                            | c)           |  |
| ONE PARK   | PLAZA          |              | (Month/Day/Year<br>07/01/2005            | ·)                            | Director _X_ Officer (gibelow)   | ve title 0th<br>below)<br>D - Western Grou | ner (specify |  |
|  | (Street)       |              | 4. If Amendment,                         | Date Original                 | 6. Individual or   | Joint/Group Fili                           | .ng(Check    |  |
| NASHVILLE, TN 37203  |                |              | Filed(Month/Day/Y                        | (ear)                         | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person |  |              |  |
| (City)   | (State)        | (Zip)        | Table I - No                             | n-Derivative Securities Ac    | quired, Disposed   | of, or Beneficia                           | ally Owned   |  |
| 1.Title of   | 2. Transaction | Date 2A. Dee | emed 3.                                  | 4. Securities                 | 5. Amount of   | 6. Ownership                               | 7. Nature    |  |

|                 |                     | Table              | Table 1 - Non-Delivative Securities Acquired, Disposed of, or Deficiency Owned |                        |         |              |                  |              |              |  |
|-----------------|---------------------|--------------------|--|------------------------|---------|--------------|------------------|--------------|--------------|--|
| 1.Title of      | 2. Transaction Date | 2A. Deemed         | 3.   | 4. Securi              | ties    |              | 5. Amount of     | 6. Ownership | 7. Nature of |  |
| Security        | (Month/Day/Year)    | Execution Date, if | Transactio   | onAcquired             | 1 (A) c | or           | Securities       | Form: Direct | Indirect     |  |
| (Instr. 3)      |                     | any                |  | Disposed of (D)        |         | Beneficially | (D) or           | Beneficial   |              |  |
|                 |                     | (Month/Day/Year)   | (Instr. 8)   | 3) (Instr. 3, 4 and 5) |         | Owned        | Indirect (I)     | Ownership    |              |  |
|                 |                     |                    |  |                        |         | Following    | (Instr. 4)       | (Instr. 4)   |              |  |
|                 |                     |                    |  |                        | ( )     |              | Reported         |              |              |  |
|                 |                     |                    |  |                        | (A)     |              | Transaction(s)   |              |              |  |
|                 |                     |                    | Code V   | A 4                    | or      | D            | (Instr. 3 and 4) |              |              |  |
|                 |                     |                    | Code V   | Amount                 | (D)     | Price        |                  |              |              |  |
| Common<br>Stock | 07/01/2005          |                    | A(1)   | 1,355                  | A       | \$ 0         | 43,665           | D            |              |  |
| Common<br>Stock | 07/01/2005          |                    | F  | 400                    | D       | \$0          | 43,265           | 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.

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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 | 3A. Deemed         | 4.         | 5.         | 6. Date Exerc | cisable and | 7. Title  | and         | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|-------------|-----------|-------------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | orNumber   | Expiration D  | ate         | Amount    | t of        | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/   | Year)       | Underly   | ing         | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e             |             | Securitie | es          | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |               |             | (Instr. 3 | and 4)      |             | Own    |
|             | Security    |                     |                    |            | Acquired   |               |             |           |             |             | Follo  |
|             | •           |                     |                    |            | (A) or     |               |             |           |             |             | Repo   |
|             |             |                     |                    |            | Disposed   |               |             |           |             |             | Trans  |
|             |             |                     |                    |            | of (D)     |               |             |           |             |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |               |             |           |             |             |        |
|             |             |                     |                    |            | 4, and 5)  |               |             |           |             |             |        |
|             |             |                     |                    |            |            |               |             | ^         | mount       |             |        |
|             |             |                     |                    |            |            |               |             |           | mount       |             |        |
|             |             |                     |                    |            |            | Date          | Expiration  | Title N   | r<br>Jumber |             |        |
|             |             |                     |                    |            |            | Exercisable   | Date        |           |             |             |        |
|             |             |                     |                    | C + V      | (A) (D)    |               |             | 0         |             |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |               |             | S         | hares       |             |        |

## **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |         |       |  |  |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|--|
|                                | Director      | 10% Owner | Officer | Other |  |  |  |  |
| SHALLCROSS RICHARD J           |               |           | CFO -   |       |  |  |  |  |
| ONE PARK PLAZA                 |               |           | Western |       |  |  |  |  |
| NASHVILLE, TN 37203            |               |           | Group   |       |  |  |  |  |

## **Signatures**

By: /s/ John M. Franck II, 07/06/2005 Attorney-in-Fact

> \*\*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).
- Pursuant to the HCA Inc. Amended and Restated Management Stock Purchase Plan, which includes tax withholding rights, shares acquired at a 25% discount (\$38.14) and subject to the terms and conditions of the Plan.

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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