Edgar Filing: Duckworth David M. - Form 4

Duckworth D	David M.										
Form 4 February 07,	2019										
								OMB APPROVAL			
	UNITE	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								3235-0287	
Check thi if no long subject to Section 10 Form 4 or	er STATE 6.									Expires: January 31 2005 Estimated average burden hours per response 0.5	
Form 5 obligation may conti <i>See</i> Instru 1(b).	^{is} Section 1'	ursuant to 3 7(a) of the 30(h)	1								
(Print or Type R	lesponses)										
Duckworth David M. Symbol				r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
				Healthcare Company, Inc.]				(Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/D) 6100 TOWER CIRCLE, SUITE 02/05/20 1000 02/05/20				-				Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
				ndment, Date Original				6. Individual or Joint/Group Filing(Check			
				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)						Person			
	. ,						_	uired, Disposed of		-	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any	med n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	4. Securi n(A) or Di (Instr. 3, Amount	ispose	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	02/05/2019			F	287	D	\$ 27.79	35,687	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)

1. Title	of 2.		3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivat	tive Conve	ersion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	Date	Amou	unt of	Derivative	Deriv
Securit	y or Exe	ercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secu
(Instr. 3	3) Price	of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	rities	(Instr. 5)	Bene
,	Deriv	ative		· · · ·		Securities	5		(Instr	. 3 and 4)	, ,	Owne
	Secur					Acquired			(, , ,		Follo
	Seeur					(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						(msu
						(insu: 5, 4, and 5)						
						4, and 5)						
										Amount		
							D.	.		or		
							Date	Expiration	Title	Number		
							Exercisable	Date		of		
					Code V	(A) (D)				Shares		
						() (2)						
Bor	ortin		wners									
		u U										

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Reporting Owner Name / Address			Relationships			
	Director	10% Owner	Officer	Other		
Duckworth David M. 6100 TOWER CIRCLE, SUITE 1000 FRANKLIN, TN 37067			Chief Financia	l Officer		
Signatures						
/s/ Christopher L. Howard as Attorney Duckworth	02/07/2019					
<u>**</u> Signature of Reporting	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).

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.