SHERIFF W E Form 4 March 10, 2009

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

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Section 16.
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

SECURITIES

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SHERIFF W E				2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer			
	(Last)	(First) (Middle)		ale Senio f Earliest T	r Living Inc. [BKD]	(Ch	eck all applica	ble)	
	111 WEST 200	WOOD PLACE,	SUITE	(Month/I 03/09/2	Day/Year) 2009		DirectorX Officer (g below) Chie	ive title 1 below) of Executive Of	Other (specify	
		(Street)			· ·	ate Original	6. Individual or	Joint/Group F	iling(Check	
	BRENTWO	OOD, TN 37027		Filed(Mo	nth/Day/Yea	r)	Applicable Line) _X_ Form filed by Form filed by Person	y One Reporting y More than One		
	(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative Securities Acc	quired, Disposed	of, or Benefic	ially Owned	
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4	sposed 4 and 3 (A) or	of (D) 5)	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)
Common Stock	03/09/2009		Code V P	Amount 14,900	(D)	Price \$ 3.41	190,500	D	
Common Stock	03/09/2009		P	7,100	A	\$ 3.43	197,600	D	
Common Stock	03/09/2009		P	5,800	A	\$ 3.46	12,800	I	By W.E. Sheriff Family Partnership
Common Stock	03/09/2009		P	16,200	A	\$ 3.47	29,000	I	By W.E. Sheriff Family

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			Partnership
Common Stock	249,752	I	By GRAT
Common Stock	243,552	I	By Sheriff Financial, LLC
Reminder: Report on a separate line for each class of securities beneficially owned	l directly or indirectly.		

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)			5. orNumber	6. Date Exerc Expiration D	ate	7. Title Amour	nt of	8. Price of Derivative	9. Nu Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities	;		(Instr. :	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(
					4, and 5)						
					., ,						
									Amount		
						Date	Expiration	(or		
							Date	Title 1	Number		
						LACICISADIC	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
Fg	Director	10% Owner	Officer	Other			
SHERIFF W E							
111 WESTWOOD PLACE			Chief Executive Officer				

Signatures

BRENTWOOD, TN 37027

/s/ Chad C. White, By Power of 03/10/2009 Attorney

> **Signature of Reporting Person Date

Reporting Owners 2

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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.