Community Healthcare Trust Inc

Form 4

October 06, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL OMB

3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Form 5 obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Common

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * WALLACE TIMOTHY G			uer Name and Ticker l nunity Healthcare [T]	or rruumg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
TRUST IN	(First) MUNITY HEAL' ICORPORA, 332 ROVE DRIVE, S	(Montl THCARE 10/06	of Earliest Transactic n/Day/Year) /2016	X Director 10% OwnerX Officer (give title Other (specify below) Chairman, CEO and President				
	(Street)		mendment, Date Origi Ionth/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
FRANKLI	N, TN 37067				Person			
(City)	(State)	(Zip) Ta	ıble I - Non-Derivativ	ve Securities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Transactionor Dispo Code (Instr. 3) (Instr. 8)	(A) or t (D) Price \$	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)	
Stock	10/06/2016		P (1)	A 21.9191	1 299,159	D	A 41	
							Athena	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Funding

Partners, LLC (3)

120,000

I

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4.	5. onNumber	6. Date Exerc Expiration D		7. Titl		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(Month/Day/Tear)	any (Month/Day/Year)	Code (Instr. 8)	of	(Month/Day/		Under Securi	rlying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

WALLACE TIMOTHY G C/O COMMUNITY HEALTHCARE TRUST **INCORPORA** 3326 ASPEN GROVE DRIVE, SUITE 150 FRANKLIN, TN 37067

Chairman, CEO and X President

Signatures

/s/ Christopher M. Douse, 10/06/2016 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).
- The purchases reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 29, 2016.
- The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$21.34 to \$22.23, inclusive. The reporting person undertakes to provide to Community Healthcare Trust Incorporated, any security holder of Community Healthcare Trust Incorporated, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote (2) to this Form 4.
- (3) The amount shown represents the beneficial ownership of the Company's securities by Athena Funding Partners, LLC ("AFP"). The reporting person owns 99% of AFP and disclaims beneficial ownership of the securities to the extent it exceeds his pecuniary interest

Reporting Owners 2

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therein and the inclusion of the shares in this report shall not be deemed to be an admission of beneficial ownership of the reported shares for the purposes of Section 16 to the Exchange Act or otherwise.

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.