Community Healthcare Trust Inc Form 4/A February 25, 2016

OMB APPROVAL

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

OMB Number:

3235-0287

0.5

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average

Form 4 or Form 5 obligations

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

burden hours per response...

may continue. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

Barnes W. Page

2. Issuer Name and Ticker or Trading

Symbol

Community Healthcare Trust Inc

[CHCT]

3. Date of Earliest Transaction

(Month/Day/Year)

Director 10% Owner X_ Officer (give title Other (specify

5. Relationship of Reporting Person(s) to

(Check all applicable)

below) Executive Vice President & CFO

C/O COMMUNITY HEALTHCARE 01/15/2016 TRUST INC., 354 COOL SPRINGS

(First)

BLVD., SUITE 106

(Street) 4. If Amendment, Date Original

(Middle)

Filed(Month/Day/Year)

01/20/2016

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Issuer

FRANKLIN, TN 37067

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. Transactionr Disposed of (D) Code (Instr. 8)

4. Securities Acquired (A) 5. Amount of (Instr. 3, 4 and 5)

Securities Beneficially Owned **Following** Reported

Ownership Form: Direct (D) or Indirect

(Instr. 4)

Indirect Beneficial Ownership (Instr. 4)

SEC 1474

(9-02)

7. Nature of

(A) or

(D) Price Code V Amount

(Instr. 3 and 4)

Common 01/15/2016 Stock

\$ Α 16,832 A 17.823 (1)

56,521 D

Transaction(s)

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

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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. Titl	e and	8. Price of	9. Nu
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate Amou		nt of	Derivative	Deriv
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative Securities				Securi	ities	(Instr. 5)	Bene
		Derivative							(Instr. 3 and 4)			Own
		Security				Acquired						Follo
		•				(A) or						Repo
						Disposed						Trans
					of (D) (Instr. 3,							(Instr
						4, and 5)						
										A		
										Amount		
						I (A) (D)	Date Exercisable	Expiration Date	Title	or Namelana		
										Number		
					C 1 W					of		
					Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Other Director 10% Owner Officer

Barnes W. Page C/O COMMUNITY HEALTHCARE TRUST INC. 354 COOL SPRINGS BLVD., SUITE 106 FRANKLIN, TN 37067

Executive Vice President & CFO

Signatures

Christopher Douse, 02/25/2016 Attorney-in-Fact

**Signature of Reporting Person

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).

period. Because the reporting person elected to take his base salary for 2016 in these shares of restricted stock, the Company awarded Mr. Barnes additional compensation, in restricted stock, equal to his annual salary. The price of the securities acquired by the reporting person is based on the volume weighted average price of the Company's common stock for the 10 trading days immediately preceding January 15, 2016, which was \$17.823. The number of securities issued is equal to the total salary, including the additional compensation, divided by such price.

For 2016, the reporting person agreed to take 100% of his salary in the form of shares of restricted stock with an eight-year restriction

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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