Edgar Filing: CHIDSEY JOHN - Form 4

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Form 4	HN									
May 07, 2018	4							OMB AF	PROVAL	
	Washington, D.C. 20549							OMB Number:	3235-0287	
Check this b if no longer subject to Section 16. Form 4 or									Expires: January 31 200 Estimated average burden hours per response 0.	
Form 5 obligations may continu <i>See</i> Instruct 1(b).	Bection 17(a)	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								
(Print or Type Res	ponses)									
1. Name and Add CHIDSEY JO	ress of Reporting Per HN	Symbol	-				5. Relationship of Reporting Person(s) to Issuer			
(Least)	(First) (Mid	•						k all applicable)		
(Last) 6915 GRANA	(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 05/04/2018				X_ Director 10% Owner Officer (give title Other (specify below) below)				
	(Street)		4. If Amendment, Date Original Filed(Month/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 			
CORAL GAB	LES, FL 33146						Form filed by M Person	lore than One Re	porting	
(City)	(State) (Zi	p) Table]	l - Non-Der	ivative Se	curities	s Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	()		
Encompass Health Common Stock	05/04/2018		А	2,386 (1)	A	\$0	107,971	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
				Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
, e e	Director	10% Owner	Officer	Other				
CHIDSEY JOHN 6915 GRANADA BOULEVARD CORAL GABLES, FL 33146	Х							
Signatures								
/s/ Patrick Darby, attorney-in-fact for John W. Chidsey 05/07/2018								
<u>**</u> Signature of Reporting Perso		Date						
Explanation of Resp	onse	s:						

* 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).

(1) Annual award of restricted stock units pursuant to the Corporation's 2016 Omnibus Performance Incentive 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.