

HCA INC/TN  
Form 4  
November 21, 2006

**FORM 4** UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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 Responses)

1. Name and Address of Reporting Person \*  
JOHNSON R MILTON

(Last) (First) (Middle)  
ONE PARK PLAZA  
(Street)

NASHVILLE, TN 37203

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
HCA INC/TN [(HCA)]

3. Date of Earliest Transaction (Month/Day/Year)  
11/17/2006

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
Executive Vice President & CFO

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
\_\_\_\_ Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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 Ownership (Instr. 4)
				(A) or (D) Price			
Common Stock	11/17/2006		D	V Amount (D) \$ 51 (1)	0	D	
Common Stock	11/17/2006		D	993 (2) (D)	0	I	By 401(k)

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.**

SEC 1474 (9-02)

Edgar Filing: HCA INC/TN - Form 4

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

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Security (Instr. 3 and 4)
					Acquired (A)	Disposed of (D)	Date Exercisable	Expiration Date	
Non-Qualified Stock Option (right to buy)	\$ 17.116	11/17/2006		D	9,850		03/04/2003	03/04/2009	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 17.116	11/17/2006		D	98,414		03/04/2003	03/04/2009	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 35.6	11/17/2006		D	15,000		<u>(5)</u>	03/22/2011	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 41.84	11/17/2006		D	40,000		<u>(6)</u>	01/24/2012	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 42.15	11/17/2006		D	40,000		<u>(6)</u>	01/29/2013	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 45.86	11/17/2006		D	60,000		<u>(6)</u>	01/29/2014	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 41.05	11/17/2006		D	100,000		<u>(6)</u>	07/22/2014	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 44.74	11/17/2006		D	21,025		<u>(7)</u>	01/27/2015	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 54.73	11/17/2006		D	21,025		<u>(7)</u>	01/27/2015	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 49.59	11/17/2006		D	21,025		<u>(7)</u>	01/27/2015	Common Stock
Non-Qualified Stock Option (right to buy)	\$ 49.9	11/17/2006		D	18,125		<u>(7)</u>	01/26/2016	Common Stock



## Edgar Filing: HCA INC/TN - Form 4

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.