FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasnington,	D.C. 20549	

OMB APPROVAL	
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OMB Number: 3235-0287 Estimated average burden 0.5 hours per response:

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

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

Common	Stock	3. Transaction	Table II - [ive Sec		Acqui	option	s, c	4,086 esed of, o	or B	A Benefi	ies)	(Instr. 3 ar	nd `4)	<u> </u>	D 10.	11. Nature
Date		2. Transa Date (Month/D		2A. Deemed Execution Date, if any (Month/Day/Year)		` ` 		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		3, 4 and 5)	and 5) Securities Beneficial Owned Fo Reported Transactio		Form: (D) or	orm: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
		Ta	ıble I - Non						Disp					Owned				
(City)	(9	State)	(Zip)											Person				
(Street) NASHVI	ILLE T	N	37219										Line)	Form file	,		ing Person One Report	
414 UNI	ON STREE	ET, SUITE 2000			4. If Am	endment, I	Date of C	Original F	iled (Month/Day/Y	/ear	·)		ividual or Jo	int/Group	Filing (Check Appl	icable
(Last)	`	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/08/2014						Officer (below)	give title		Other (s below)	pecify			
	nd Address of <u>GARY</u>	Reporting Person*				r Name ar ISIAN				mbol <u>RP</u> [LPX	[]			ationship of k all applica Director		g Persoi	n(s) to Issu 10% Ow	

Explanation of Responses:

\$<mark>0</mark>

\$<mark>0</mark>

Restricted

Stock Unit

Restricted

1. Award granted pursuant to the 2013 Omnibus Stock Award plan

05/08/2014

05/10/2014

 $2. \ Restricted stock units vest on the first anniversary of grant date.$

/s/ Mark A Fuchs for Gary Cook 05/12/2014

\$<mark>0</mark>

\$<mark>0</mark>

** Signature of Reporting Person

or Number

5,185

4,086

Stock

Common

Stock

Expiration Date

05/08/2015

05/10/2014

Date

0

0

D

D

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

- * 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).

Code

A

C

(A)

5,185(1)

(D)

4,086

05/08/2015(2)

05/10/2014

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.