Edgar Filing: HEALTHSOUTH CORP - Form 4

HEALTHSOU	TH CORP										
Form 4											
January 06, 20	11										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31, 2005	
subject to Section 16. Form 4 or	F CHANGES IN BENEFICIAL OWNE SECURITIES					ERSHIP OF	Estimated a burden hour response	verage			
Form 5 obligations may contin <i>See</i> Instruct 1(b).	ue. Section	17(a) of the		ity Hold	ing Com	pany	Act of	Act of 1934, 1935 or Section)			
(Print or Type Res	sponses)										
HANSON JON F Sy			Symbol					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Check all applicable)				
(Month/D				h/Day/Year)/2011				_X_ Director 10% Owner Officer (give title Other (specify below) below)			
(Street) 4. If Amend Filed(Month FAR HILLS, NJ 07931				h/Day/Year) A				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Table	I - Non-D	erivative So	ecurit	ties Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Healthsouth Common Stock	01/05/2011			J <u>(1)</u>	1,139	A	\$ 21.051	58,356	D		
Healthsouth Common Stock								6,000	Ι	By Spouse	
Healthsouth Common Stock								12,200	I	By Trust	

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

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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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships								
I. O. I.	Director	10% Owner	Officer	Other					
HANSON JON F									
601 HOLLAND ROAD	Х								
FAR HILLS, NJ 07931									
Signatures									
John P. Whittington, attorney-in-fact for Jon F.									
Hanson			(01/05/201	1				
**Signature of Reporting		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).

This transaction is a purchase of shares of common stock of HealthSouth Corporation (the "Company") pursuant to an election by the reporting person to participate in the Directors Deferred Stock Investment Plan of the Company (the "Plan"). The Plan is a non-qualified deferral plan adopted and effective November 1, 2007, allowing non-employee directors to make elections during 2010 to defer fixed

(1) percentages of their directors fees for 2011. The amount each participant defers under the Plan is deducted, on a quarterly basis, from the directors fees the participant would otherwise have received in cash. The transaction reported on this Form 4 is the acquisition of common stock of the Company in the market for the account of the reporting person, for an aggregate purchase price equal to the amount of fees deferred by the reporting person for the current quarter of 2011 under the 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.