

Laughlin Conan  
Form 4  
November 17, 2017

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2015  
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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 \*  
Laughlin Conan

(Last) (First) (Middle)

701 COOL SPRINGS BOULEVARD

(Street)

FRANKLIN, TN 37067

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
TIVITY HEALTH, INC. [TVTY]

3. Date of Earliest Transaction (Month/Day/Year)  
11/15/2017

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)

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 Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price
Common Stock	11/15/2017		S		69,050	D	\$ 33.87
					308,950 <sup>(1)</sup>	I	
							By North Tide Capital Master, LP <sup>(2)</sup>
Common Stock	11/15/2017		S		30,690	D	\$ 33.87
					137,310 <sup>(1)</sup>	I	
							By Managed Account of North Tide Capital, LLC <sup>(3)</sup>
Common Stock	11/15/2017		S		15,347	D	\$ 33.87
					68,653 <sup>(1)</sup>	I	
							By NTC Special Opportunities I Master, LP

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Common Stock	11/16/2017	S	137,400	D	\$ 34.4	171,550 <sup>(1)</sup>	I		<sup>(4)</sup> By North Tide Capital Master, LP <sup>(2)</sup>
Common Stock	11/16/2017	S	61,070	D	\$ 34.4	76,240 <sup>(1)</sup>	I		By Managed Account of North Tide Capital, LLC <sup>(3)</sup>
Common Stock	11/16/2017	S	30,530	D	\$ 34.4	38,123 <sup>(1)</sup>	I		By NTC Special Opportunities I Master, LP <sup>(4)</sup>
Common Stock	11/17/2017	S	87,550	D	\$ 34.61	84,000 <sup>(1)</sup>	I		By North Tide Capital Master, LP <sup>(2)</sup>
Common Stock	11/17/2017	S	38,910	D	\$ 34.61	37,330 <sup>(1)</sup>	I		By Managed Account of North Tide Capital, LLC <sup>(3)</sup>
Common Stock	11/17/2017	S	19,453	D	\$ 34.61	18,670 <sup>(1)</sup>	I		By NTC Special Opportunities I Master, LP <sup>(4)</sup>
Common Stock						17,590 <sup>(5)</sup>	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.**

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(9-02)

**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 Acquired (A) or Disposed of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu
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(Instr. 3, 4, and 5)

								Amount or Number of Shares
					Date Exercisable	Expiration Date	Title	
Code	V	(A)	(D)					

# Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Laughlin Conan 701 COOL SPRINGS BOULEVARD FRANKLIN, TN 37067		X		

# Signatures

/s/ Mary Flipse, by power of attorney for Conan Laughlin 11/17/2017

\*\*Signature of Reporting Person 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).
- (1) The Reporting Person disclaims beneficial ownership of the shares of Common Stock reported herein except to the extent of his pecuniary interest therein, and this report shall not be deemed to be an admission that the Reporting Person is the beneficial owner of such shares of Common Stock for purposes of Section 16 or for any other purpose.
- (2) Shares of Common Stock beneficially owned by North Tide Capital Master, LP (the "Master Fund"). North Tide Capital, LLC ("North Tide"), as the investment manager of the Master Fund, may be deemed to be the beneficial owner of the shares of Common Stock beneficially owned by the Master Fund. The Reporting Person, as the Manager of North Tide, may be deemed to be the beneficial owner of the shares of Common Stock beneficially owned by the Master Fund.
- (3) Shares held in an account managed by North Tide. The Reporting Person, as the Manager of North Tide, may be deemed to be the beneficial owner of the shares of Common Stock beneficially owned by North Tide.
- (4) Shares of Common Stock beneficially owned by NTC Special Opportunities I Master, LP ("NTC"). North Tide, as the investment manager of NTC, may be deemed to be the beneficial owner of the shares of Common Stock beneficially owned by NTC. The Reporting Person, as the Manager of North Tide, may be deemed to be the beneficial owner of the shares of Common Stock beneficially owned by NTC.
- (5) Includes shares underlying restricted stock units that vest in accordance with the schedules set forth in the Reporting Person's Form 4s.
- 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.