

FIRST HORIZON NATIONAL CORP
 Form 3
 October 27, 2008

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF 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 * Â Gusmus Frank (Last) (First) (Middle) 165 MADISON AVENUE (Street) MEMPHIS,Â TNÂ 38103 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 10/20/2008	3. Issuer Name and Ticker or Trading Symbol FIRST HORIZON NATIONAL CORP [FHN]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) President-FTN Financial	5. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
---	--	--	---	--	---

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	23,047	I	401(k)
Common Stock	103	I	by son
Common Stock	33,988	D	Â

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership
---	---	--	---------------------------	----------------------	--

Edgar Filing: FIRST HORIZON NATIONAL CORP - Form 3

	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	(Instr. 5)
Stock Options (Right to Buy)	03/03/2006	03/03/2010	Common Stock	1,842	\$ 38.74	D	Â
Stock Options (Right to Buy)	08/06/2006	03/01/2020	Common Stock	7,805	\$ 36.235	D	Â
Stock Options (Right to Buy)	02/17/2007	02/17/2011	Common Stock	3,198	\$ 45.73	D	Â
Stock Options (Right to Buy)	04/24/2007	02/24/2017	Common Stock	6,555	\$ 43.23	D	Â
Stock Options (Right to Buy)	04/28/2007	03/01/2010	Common Stock	1,957	\$ 43.32	D	Â
Stock Options (Right to Buy)	04/28/2007	02/19/2018	Common Stock	6,542	\$ 43.32	D	Â
Stock Options (Right to Buy)	06/02/2007	10/19/2009	Common Stock	33,269	\$ 46.75	D	Â
Stock Options (Right to Buy)	04/20/2010	04/20/2014	Common Stock	3,750	\$ 39.66	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Gusmus Frank 165 MADISON AVENUE MEMPHIS, TN 38103	Â	Â	Â President-FTN Financial	Â

Signatures

/s/ John A. Niemoeller, attorney-in-fact for Mr. Gusmus 10/27/2008

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

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.