FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	OMB APPF	ROVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-

OMB Number:	3235-0287
Estimated average burd	len
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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1 Nome as	nd Addrone of	Donorting Doross*			2 Issue	r Name ar	nd Ticl	ker or Tra	dina <sup>c</sup>	Symbol		-	Rel	ationship o	f Reporting	Perso	on(s) to Issu	er
1. Name and Address of Reporting Person* TROMBETTI NICOLA					2. Issuer Name <b>and</b> Ticker or Trading Symbol NN INC [ NNBR ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
													X	Officer	(give title		Other (s	
(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)									below)	low) below anaging Director NN Euro		below) NN Europe	′ I
2000 WATERS EDGE DRIVE, BLDG. C				08/19/2005									ividita	Sing Direc		W Europ	-	
SUITE 1	2			L														
(Street)				.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
JOHNSO	ON TI	V	37604										X	Form fi	led by One	Repor	rting Person	
CITY	11		37004											Form fi Person		than	One Report	ing
(City)	(5	tate)	(Zip)															
(Oity)	(0																	
			ole I - Non					<del>-</del>	, DIS	<del>.</del>	-			1				
Date			2. Transact Date (Month/Day	·	Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction Disposed C Code (Instr. 5)		ties Acquired (A) l Of (D) (Instr. 3, 4		4 and Securition Benefici Owned I		es Forr fally (D) of Following (I) (II		m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code V Amount (A) or (D)		Pric	e:e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
			Table II - D							osed of, convertil				Owned	,		,	
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	Cod	4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	le V	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amou or Numb of Share	er					
Stock Options	\$11.61	08/19/2005		A		15,000		08/19/20	)6 <sup>(1)</sup>	08/19/2015	Common Stock	15,0	00	\$0	15,000		D	

## **Explanation of Responses:**

1. Vests 1/3 per year from 8/19/06 - 8/19/08.

/s/William C. Kelly, Jr./by 08/23/2005 Power of Attorney

\*\* Signature of Reporting Person Date

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).

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.