FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

| wasnington, | D.C. | 20549 | |
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| Check this box if no longer subject to | |
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| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |
| | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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. Name and Address of Reporting Person* Floyd David | | | | | | 2. Issuer Name and Ticker or Trading Symbol NN INC [NNBR] | | | | | | | | | | olicable) | g Person(s) to Issuer 10% Owner | | |
|--|--|---|--|------------------------|---|--|---|-------------------------|--|--|----------|-------------------------------|--------------|---------------------------------------|---|---|---|--|-----------------------------------|
| (Last) 207 MOC | (Fii CKINGBIR | | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/19/2016 | | | | | | | | | Offic below | er (give title w) | | Other (specify below) | |
| (Street) JOHNSC CITY (City) | Tr | | 37604 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - No | on-Deriv | ative | Sec | uritie | s Ac | quired | l, Dis | sposed o | f, or E | Benefi | cially | Owne | ed | | | |
| 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) of Disposed Of (D) (Instr. 3, 4 | | | and 5) Secu Bene | | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) o (D) | Pric | е | Trans | action(s) 3 and 4) | | | (111501.4) |
| Common Stock | | | | 08/19/ | 19/2016 | | | | P | | 1,458 | A | \$10 | 5.99 ⁽¹⁾ | | 1,458 | | | By Family LP ⁽²⁾ |
| Common Stock | | | | | | | | | | | | | | | | 2,845 | D | | |
| | 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 | exercise (Month/Day/Year) if any Code (Month/Day/Year) 8) | | Transa Code (8) | Instr. | str. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expirat (Month) | ion Da /Day/Y | Securitie Underlyin Derivative Security and 4) | | nt of ties ying tive | Der Sec (Ins | rice of ivative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owner Form: Direct or Indi (I) (Ins | (D) rect | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$16.98 to \$17.00, inclusive. The reporting person undertakes to provide to NN, Inc., any security holder of NN, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.
- 2. Shares are held by the David and Lisa Floyd Family Limited Partnership of which the reporting person and his wife are the sole general partners and sole limited partners.

/s/ Matthew S. Heiter by Power of Attorney 08/23/2016

** 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.