SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* <u>DORTON JAMES HAROLD</u>			2. Date of Event Requiring Staten Month/Day/Year 06/09/2005	nent 🔤	3. Issuer Name and Ticker or Trading Symbol <u>NN INC</u> [NNBR]					
	00 WATERS EDGE DRIVE, BLDG. C				(Check	tionship of Reporting Perso all applicable) Director	10% Owne	er (5. If Amendment, Date of Original Filed (Month/Day/Year)	
SUITE 12 (Street) JOHNSON CITY	TN	37604			X	Officer (give title below) V. President and	Other (spe below) CFO	· [6	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-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)				4. Nature of Indirect Beneficial Ownership (Instr. 5)		
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 Secur Underlying Derivative Securi					6. Nature of Indirect Beneficial Ownership (Instr. 5)

Explanation of Responses:

No securities are beneficially owned.

/s/William C. Kelly, Jr./by

Power of Attorney

** Signature of Reporting Person

06/27/2005

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 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.

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.