FORM 4

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

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1/h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*  DORTON JAMES HAROLD						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  Officer (give title Other (specify				
(Last) (First) (Middle) 207 MOCKINGBIRD LANE					3. Date of Earliest Transaction (Month/Day/Year) 04/30/2015								- 2	below)		inano	below)	
(Street) JOHNSON	JOHNSON TN 37604			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	te) (Z	ip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ear)   i	f any	cution Date,		Transaction Dispose Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 au				s Formally (D) (of ollowing (I) (I		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v	Amount	(A) or (D)		rice	Reported Transact (Instr. 3 a	tion(s)			Instr. 4)
Common Stock 04/30/					/2015		A		3,865	1) A		\$0	53,	606		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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	ate, Tran	saction e (Instr			6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	e V	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	nount mber ares					
Performance	(2)	04/30/2015		A		3,865		(3)		(3)	Common	3,	865	\$0	3,865		D	

## **Explanation of Responses:**

- 1. Shares are restricted stock, which vest over a period of three years beginning on April 30, 2015.
- 2. Each performance right represents a contingent right to receive one share of common stock of NN, Inc. (the "Issuer").
- 3. The vesting of the performance rights is based on the relative total shareholder return ("TSR") of the Issuer, as compared to the TSR of the S&P SmallCap 600 Index over the period beginning on February 1, 2015 and ending December 31, 2017. The Performance rights will vest on December 31, 2017 subject to the reporting person's continuous employment through December 31, 2017 and subject to certain conditions as set forth in the Issuer's 2011 Stock Incentive Plan. Performance rights granted represent the right to receive the target shares, and actual performance rights earned may be between 50% and 150% of the target shares. Performance rights that do not vest on December 30, 2017 expire automatically.

## Remarks:

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

05/04/2015

\*\* 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.