Edgar Filing: SAIA INC - Form 4

SAIA INC											
Form 4											
June 09, 2015	5										
FORM	Л								OMB A	PPROVAL	
	4 UNITED	STATES		ITIES A hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this									Expires:	January 31,	
subject to STATEMENT OF CHANG				GES IN BENEFICIAL OWN				NERSHIP OF	•	2005	
Section 16	.	SECURITIES								Estimated average burden hours per	
Form 4 or									response	•	
Form 5	Filed pu	rsuant to S	Section 16	6(a) of the	e Securiti	ies Ex	chang	ge Act of 1934,			
obligation	^s Section 17						-	f 1935 or Sectio	n		
may contin <i>See</i> Instrue 1(b).	nue.		of the Inv	•	•	- ·					
(Print or Type R	esponses)										
	ldress of Reporting	g Person <u>*</u>		Name and	Ticker or '	Fradin	g	5. Relationship o	f Reporting Per	rson(s) to	
Robinson Ma	ark H		Symbol					Issuer			
SAIA			SAIA IN	A INC [SAIA]				(Check all applicable)			
(Last)	(First) ((Middle)	3. Date of	Earliest Tra	ansaction			(Che	ek an appliedor	()	
			(Month/Da	ay/Year)				Director	109	% Owner	
11465 JOHN	IS CREEK PAF	RKWAY,	06/05/20	•				X Officer (giv		er (specify	
SUITE 400								below) Vice	below) President of I	Г	
(Street) 4. If Amer				endment, Date Original			6. Individual or Joint/Group Filing(Check				
Filed(Mont				Ionth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
JOHNS CRE	EEK, GA 30097								More than One R		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Da			3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year	 Execution any 	on Date, if		onAcquired			Securities	Form: Direct	Indirect	
(Instr. 3)		CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(monus	Duy/Tour)	(1130.0)	(1150.5,	i una	5)	Following	(Instr. 4)	(Instr. 4)	
						(1)		Reported	, ,		
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	06/05/2015			S	1,000	D	\$ 42	17,799.5	D		

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

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 Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 27.28					04/30/2016	04/29/2020	Common Stock	9,510
Stock Options (Right to Buy)	\$ 31.5					02/04/2017	02/03/2021	Common Stock	6,570
Stock Options (Right to Buy)	\$ 43.01					02/03/2018	02/03/2022	Common Stock	6,410
Phantom Stock	<u>(1)</u>					(2)	(3)	Common Stock	13,486.056

Reporting Owners

Reporting Owner Name / Address	Relationships					
Topolog of the Linner Linner	Director	10% Owner	Officer	Other		
Robinson Mark H 11465 JOHNS CREEK PARKWAY, SUITE 400 JOHNS CREEK, GA 30097			Vice President of IT			
Signatures						
/s/ Stephanie R						

/s/ Stephanie R. 06/09/2015 Maschmeier <u>**</u>Signature of Reporting Date

Person

Explanation of Responses:

- * 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).
- (1) The conversion rate of this derivative security on June 5, 2015 is 1.1992 resulting in 16,172.08 shares of common stock (underlying security in column 7).

- (2) Immediate
- (3) The shares of phantom stock become payable in the Company's stock upon reporting person's termination of service as an employee, in accordance with the terms of the Plan.

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.