## Edgar Filing: FORWARD AIR CORP - Form 4

| FORWARD   | AIR CORP                           |  |   |                            |                  |           |   |  |  |             |  |  |
|---|------------------------------------|--|---|----------------------------|------------------|-----------|---|--|--|-------------|--|--|
| Form 4  | _                                  |  |   |                            |                  |           |   |  |  |             |  |  |
| May 13, 2016  |                                    |  |   |                            |                  |           |   |  | <u></u>                                    |             |  |  |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION |                                    |  |   |                            |                  |           |   | r  | PPROVAL                                    |             |  |  |
| Washington, D.C. 20549                                  |                                    |  |   |                            |                  |           |   | OMB<br>Number:   | 3235-0287                                  |             |  |  |
| Check this  |                                    |  | • • •                                     |                            | <b>D.C. 2</b> 00 |           |   |  | Expires:                                   | January 31, |  |  |
| if no longer<br>subject to STATEMENT OF CHANG           |                                    |  |   | GES IN BENEFICIAL OWN      |                  |           |   | <b>NERSHIP OF</b>  |  | 2005        |  |  |
| Section 10  | -                                  |  |   |                            | SECURITIES       |           |   |  | Estimated average burden hours per         |             |  |  |
| Form 4 or<br>Form 5                                     |                                    |  | ~ • • • •                                 |                            | ~                | _         |   |  | response                                   | •           |  |  |
| obligation  | ~ ~                                |  |   |                            |                  |           |   | ge Act of 1934,  |  |             |  |  |
| may conti   | nue. Section 1                     |  | of the Inv                                | •                          | •                | - ·       |   | f 1935 or Sectio   | n  |             |  |  |
| See Instru<br>1(b).                                     | ction                              | 50(11)   | of the my                                 | estinent v                 | compan           | y 1101    | 0117                                      | -10  |  |             |  |  |
|   |                                    |  |   |                            |                  |           |   |  |  |             |  |  |
| (Print or Type R  | esponses)                          |  |   |                            |                  |           |   |  |  |             |  |  |
| 1   |                                    | D *  |   |                            |                  |           |   | 5 0 1 (* 1* 1  |  |             |  |  |
| LYNCH GE  | ddress of Reportin                 | g Person _   |   | Name and Ticker or Trading |                  |           |   | 5. Relationship of Reporting Person(s) to<br>Issuer        |  |             |  |  |
| Symoor  |                                    |  |   | ARD AIR CORP [FWRD]        |                  |           |   |  |  |             |  |  |
| (Lost)  | (First)                            | (Middle)   |   |                            | L                |           |   | (Chec  | ck all applicable                          | e)          |  |  |
| (Month/Da   |                                    |  | f Earliest Transaction                    |                            |                  |           | X_ Director10% Owner                      |  |  |             |  |  |
|   |                                    |  | 05/11/20                                  | -                          |                  |           |   | Officer (give title Other (specify                         |  |             |  |  |
|   |                                    |  |   |                            |                  |           |   | below) below)  |  |             |  |  |
|   |                                    |  | endment, Date Original                    |                            |                  |           | 6. Individual or Joint/Group Filing(Check |  |  |             |  |  |
| Filed(Mont  |                                    |  |   | th/Day/Year)               |                  |           |   | Applicable Line)<br>_X_ Form filed by One Reporting Person |  |             |  |  |
| GREENEVI  | LLE, TN 3774                       | 5  |   |                            |                  |           |   | Form filed by M<br>Person                                  | Aore than One Ro                           | eporting    |  |  |
| (City)  | (State)                            | (Zip)  |   |                            |                  |           |   |  |  |             |  |  |
| (City)  | . ,                                | -  |   | e I - Non-Do               | erivative S      | Securi    | ties Ac                                   | quired, Disposed o   | f, or Beneficia                            | lly Owned   |  |  |
| 1.Title of  | 2. Transaction D<br>(Month/Day/Yea | med 3. 4. Securities<br>on Date, if TransactionAcquired (A) or<br>Code Disposed of (D) |   |                            |                  |           | 5. Amount of<br>Securities                | 6. Ownership<br>Form: Direct                               | <ol> <li>Nature of<br/>Indirect</li> </ol> |             |  |  |
| Security<br>(Instr. 3)                                  | (Monul/Day/Tea                     |  |   |                            |                  |           | Beneficially                              |  | Beneficial                                 |             |  |  |
|   |                                    | (Month/  | /Day/Year) (Instr. 8) (Instr. 3, 4 and 5) |                            |                  | 5)        | Owned                                     | Indirect (I)   | Ownership                                  |             |  |  |
|   |                                    |  |   |                            |                  |           |   | Following<br>Reported                                      | (Instr. 4)                                 | (Instr. 4)  |  |  |
|   |                                    |  |   |                            |                  | (A)<br>or |   | Transaction(s)   |  |             |  |  |
|   |                                    |  |   | Code V                     | Amount           |           | Price                                     | (Instr. 3 and 4)   |  |             |  |  |
| Common<br>Stock   | 05/11/2016                         |  |   | А                          | 1,965<br>(1)     | А         | \$0                                       | 17,165   | D  |             |  |  |
| STOCK   |                                    |  |   |                            | <u> </u>         |           |   |  |  |             |  |  |
|   |                                    |  |   |                            |                  |           |   |  |  |             |  |  |

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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transact<br>Code<br>(Instr. 8) | 5.<br>tionNumber<br>of<br>) Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) |     | Expiration Date<br>(Month/Day/Year) |                    | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | unt of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owno<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|---|--------------------------------------|---|-----|-------------------------------------|--------------------|--|--|---|--|
|   |   |   |   | Code V                               | / (A)   | (D) | Date<br>Exercisable                 | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |  |

## **Reporting Owners**

| Reporting Owner Name / Address                              | Relationships |           |         |       |  |  |  |
|---|---------------|-----------|---------|-------|--|--|--|
| i B   | Director      | 10% Owner | Officer | Other |  |  |  |
| LYNCH GEORGE M<br>430 AIRPORT ROAD<br>GREENEVILLE, TN 37745 | Х             |           |         |       |  |  |  |
| Signatures  |               |           |         |       |  |  |  |
| /s/ Michael P. McLean,<br>Attorney-in-Fact                  | 05/13/2016    |           |         |       |  |  |  |
| **Signature of Reporting Person                             |               | Date      | e       |       |  |  |  |

## **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).

Represents restricted stock awarded under the Forward Air Corporation Amended and Restated Non-Employee Director Stock Plan in a
 (1) transaction exempt from Section 16(b) under Rule 16b-3. The stock fully vests on the earlier of (a) the day immediately prior to the first Annual Meeting that occurs after the grant date or (b) the first anniversary of the grant date.

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.