#### CONGDON JOHN R

Form 4

February 14, 2007

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB

**OMB APPROVAL** 

Number:

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Section 16. Form 4 or Form 5 obligations

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if no longer

subject to

may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* CONGDON JOHN R

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

OLD DOMINION FREIGHT LINE INC/VA [ODFL]

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction

\_X\_\_ Director 10% Owner Other (specify X\_ Officer (give title

(Month/Day/Year) C/O OLD DOMINION FREIGHT

02/12/2007

below) Vice Chairman of the Board

LINE, INC., 500 OLD DOMINION

(Street)

WAY

4. If Amendment, Date Original

(Instr. 8)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

THOMASVILLE, NC 27360

(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial

(Instr. 4)

Ownership (Instr. 4)

(A)

(Instr. 3, 4 and 5)

Code V Amount (D) Price

Transaction(s) (Instr. 3 and 4)

Reported

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

### Edgar Filing: CONGDON JOHN R - Form 4

1. Title of	2.	3. Transaction Date	3A. Deemed	4.		5. Numb	oer	6. Date Exer	cisable and	7. Title and A	Amount of	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction Derivative			ative	Expiration Date		<b>Underlying Securities</b>		Deriva
Security	or Exercise		any	Code	Code Securities		(Month/Day/Year)		(Instr. 3 and 4)		Securi	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Acquire	d					(Instr.
	Derivative					(A) or						
	Security				Disposed of (D) (Instr. 3, 4,							
						and 5)						
				Code	V	(A)	(D)	Date	Expiration	Title	Amount	
				Code	•	(11)	(D)	Exercisable	Date	TITLE	or	
								LACICISADIC	Date		Number	
											of	
											Shares	
											Shares	
Phantom		00/10/00/0						(2)	(2)	Common	2050	4
Stock	<u>(1)</u>	02/12/2007		A		2,958		(2)	(2)	Stock	2,958	\$ (

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
CONGDON JOHN R C/O OLD DOMINION FREIGHT LINE, INC. 500 OLD DOMINION WAY THOMASVILLE, NC 27360	X		Vice Chairman of the Board			

### **Signatures**

/s/ John R.
Congdon

\*\*Signature of Reporting Person

O2/13/2007

Date

### **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) Each share of phantom stock is the economic equivalent of one share of Old Dominion Freight Line, Inc. common stock.
- The award will settle on the earlier of (a) the date of the reporting person's termination of employment on or after attainment of age 55 for (2) any reason other than death, total disability or for cause; (b) the date of the reporting person's death while employed by the issuer; or (c) the date of the reporting person's termination of employment as a result of his total disability.

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.

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