FORM 4

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

OMB APPR	ROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	pe Response	es)														
1. Name and Address of Reporting Person * Freeman Kevin M.				2. Issuer Name and Ticker or Trading Symbol OLD DOMINION FREIGHT LINE INC/VA [ODFL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)					
(Last) (First) (Middle) C/O OLD DOMINION FREIGHT LINE, INC., 500 OLD DOMINION WAY				3. Date of Earliest Transaction (Month/Day/Year) 02/13/2013							Senior Vice President of Sales					
(Street) THOMASVILLE, NC 27360				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _ Form filed by More than One Reporting Person				
(Cit	y)	(State) (Zip)			Table I - Non-Derivative Securities Acqu							ed, Dispo	sed of, or Bo	eneficially O	vned	
1.Title of S (Instr. 3)	Security	1	Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date,	if Co (In) (1	Securit A) or Di Instr. 3,	sposed	1 of (D) I 5) I	Beneficiall	of Securities y Owned Fol ransaction(s) d 4)	lowing	Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Contain	nea in i	นเมอ เง	orm are	not requ	red to resp	ona umess	trie	
			Table II - D					form d	isplays	or Be	rrently v	alid OMI	red to resp 3 control n		tne	
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, i	4. Transac Code	tion of E	Number of Derivate Acquire A) or Dispose of (D) Instr.	nts, op aber (a tive (i ies ed	form d	osed of, onvertib xercisab ration Da	or Be	rrently v	Owned of ng s	8. Price of		f 10. Ownersl Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, i	4. Transac Code	tion of E	Number of Derivate Security Acquire (A) or Dispose of (D)	nts, ophber (and tive (and	form d red, Disp ptions, co 6. Date E and Expir	isplays osed of, onvertib exercisab ration Da oay/Year	or Beble secole attern	neficially urities) 7. Title a Amount Underlyi Securities	Owned of ng s	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transactions	f 10. Ownersl Form of Derivati Security Direct (I or Indirects)	of Indirect Beneficial Ownership (Instr. 4)

P. C. O. N. (411	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Freeman Kevin M. C/O OLD DOMINION FREIGHT LINE, INC. 500 OLD DOMINION WAY THOMASVILLE, NC 27360			Senior Vice President of Sales			

Signatures

/s/ Ross H. Parr, by Power of Attorney	02/14/2013
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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 vest with respect to one-fifth of the phantom stock subject to the award on each anniversary of the grant date and the award will be fully vested on the fifth anniversary of the grant date, provided that (a) the reporting person has been continuously employed by the issuer from the grant date until each respective vesting date; (b) the

reporting person has been continuously employed by the issuer for at least 10 years on the respective vesting date; and (c) the reporting person has attained age 65 on the respective vesting date. The award will settle on the earlier of (a) the date of the reporting person's termination of employment for 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.

(3) Reflects an anti-dilution adjustment resulting from a three-for-two stock split on September 10, 2012.

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.