# FORM 4

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

OMB APPRO	JAVC	
OMB Number:	3235-0	287
Estimated average	burden	
nours per response		0.5

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

1. Name and Address of Reporting Person * CULP ROBERT G III			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)  _X_Director Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 903 FORREST HILL DR				3. Date of Earliest Transaction (Month/Day/Year) 05/24/2011											
(Street)			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					
HIGH PC	DINT, NC	27262								_	Form med t	by More than O	ne Reporting Pers	on	
(City	y)	(State)	(Zip)		Ta	able I -	Non-Deri	vative Se	ecuritio	es Acquir	ed, Dispos	ed of, or Be	neficially Ov	vned	
(Instr. 3) Date		2. Transaction Date Month/Day/Year)	2A. Deemed Execution Date, if				(A) or Disposed of (D)		of (D) B	Beneficially	of Securities Owned Fol	lowing	Ownership	7. Nature of Indirect Beneficial	
			Monas Bay, 1 car)	(Month/Da	ny/Year)			Amount	(A) or (D)	(I	(Instr. 3 and 4) Direct (I or Indire (I)		Direct (D) or Indirect	Ownership (Instr. 4)	
Reminder:	Report on a	separate line for ea	ch class of securiti	es beneficia	ally owr	ned dire	Perso	ons who nined in	this fo	orm are r	not requir		ond unless		1474 (9-02)
							form	display	s a cu	rrently v	alid OMB	control nu	ımber.		
			Table II - I				uired, Dis	posed of	f, or Be	neficially		control nu	ımber.		
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date,	4. if Transac Code	salls, was 5.7 tion of De Control Cont	rrants	uired, Dis options, or 6. Date and Exp (Month/	posed of	f, or Be ble second ble Date ar)	neficially	Owned  nd of ng s	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersh Form of Derivativ Security Direct (I or Indire	Ownershi (Instr. 4) ct
Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	4. if Transac Code	tion of Dee ) See (A Disortion of (In and	Numberivative curities equired of or sposed (D) str. 3, 4	uired, Dis. options, or 6. Date and Exp. (Month/	posed of convertil Exercisal biration D /Day/Yea	ble ble Date bar)	neficially urities) 7. Title an Amount of Underlying Securities	Owned  nd of ng s	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	Ownersh Form of Derivativ Security Direct (I or Indirects) (I)	of Indirect Beneficia Ownershi (Instr. 4)

### HIGH POINT, NC 27262

**Signatures** 

CULP ROBERT G III 903 FORREST HILL DR

Reporting Owner Name / Address

/s/ John P. Booker, by Power of Attorney	05/25/2011
**Signature of Reporting Person	Date

Director

X

### **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.

Relationships

Other

10% Owner

(2) The award will settle on the date of the reporting person's termination of service as a director for any reason (including, but not limited to, termination of service due to death or 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.