FORM 4

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

OMB APPROVAL					
MB Number:	3235-0287				
stimated average burden					
ours per response	e 0.5				

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

(Print or Type Responses) 1. Name and Address of Reporting Person * CONGDON DAVID S			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 _X_ Officer (give title below)					
(Last) (First) (Middle) C/O OLD DOMINION FREIGHT LINE, INC, 500 OLD DOMINION FREIGHT WAY			3. Date of Earliest Transaction (Month/Day/Year) 02/26/2014							Pre	sident and CE0)		
(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 PersonForm filed by More than One Reporting Person					
(City	(City) (State) (Zip) Table I - Non-Derivative Securities Acc				es Acquii	red, Dispos	ed of, or Be	neficially Ow	ned					
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, it	f Code (Instr. 8	8) (A. Securities Ad A) or Disposed Instr. 3, 4 and (A) o (Amount (D)	d of (D) 1 5) 1	Beneficially	of Securities Owned Fol ansaction(s) 4)	lowing OF	wnership orm:	Beneficial Ownership
Reminder:	Report on a	separate line for e	ach class of securiti	es benefici	ally ow	ned direc	Perso	ns who resp						474 (9-02)
Reminder:	Report on a	separate line for e	Table II - I	erivative (Securit	ies Acqu	Person contai form d	ns who responed in this following in this following is given by the contract of the contract in the contract i	orm are rrently v	not requir /alid OMB	ed to resp	ond unless t		474 (9-02)
	2. Conversion	3. Transaction	Table II - I	Derivative S.g., puts, c 4. Transac Code	Securition of Do (A) Do	ies Acqu arrants,	Persoi contai form d ired, Disp options, c 6. Date E and Expi (Month/I	ns who responed in this folioplays a cu losed of, or Be convertible sec exercisable ration Date	orm are rrently v	not requir valid OMB y Owned and of ing	ed to resp control nu 8. Price of	ond unless t	10. Ownersh Form of Derivativ Security: Direct (D	11. Natu of Indire Benefici e Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - I	Derivative S.g., puts, c 4. Transac Code	Securite alls, was tion of (A) Di of (In an	ies Acquarrants, Number Privative eccurities equired (D) or isposed (D) nstr. 3, 4,	Persoi contai form dired, Dispoptions, con dired, Dispoptions, con direction (Month/I	ns who respond in this folioplays a cure consect of, or Be convertible sector carrier attention Date Day/Year)	eneficially urities) 7. Title a Amount Underly Securitie (Instr. 3	not requir valid OMB y Owned and of ing	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownersh Form of Derivativ Security: Direct (D or Indirect	11. Natu of Indire Benefici e Ownersh (Instr. 4)

Reporting Owners

D (O N /41)	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CONGDON DAVID S C/O OLD DOMINION FREIGHT LINE, INC 500 OLD DOMINION FREIGHT WAY THOMASVILLE, NC 27360	X		President and CEO			

Signatures

/s/ John P. Booker, III, by Power of Attorney	02/27/2014
Signature of Reporting Person	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 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.

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.