# FORM 4

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

OMB APPRO	OVAL				
MB Number:	3235-0287				
stimated average burden					
ours 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

	pe Response	es)												
1. Name and Address of Reporting Person *- CONGDON JOHN R JR				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)  Z 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) 05/30/2014							Member o	of Section 13(d	) group		
(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					
(City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned				
1.Title of S (Instr. 3)	Security			2A. Deemo Execution any (Month/Da	Date, i	f Code (Instr	. 8)	4. Securities A (A) or Dispose (Instr. 3, 4 and  Amount (A) or (D)	d of (D) E	Beneficially	ansaction(s)	lowing C F C o (l	wnership orm: irect (D)	Beneficial Ownership
Reminder:	•						Perso	ns who resp	ond to th	ne collecti	on of info	rmation	SEC 1	474 (9-02)
Reminder:							contai form o	ons who respined in this fidisplays a cuposed of, or Bennyertible see	orm are in the orm or are in the original or	not requir alid OMB	ed to resp	ond unless		474 (9-02)
1. Title of	Conversion	3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Date,	4. Transac Code	alls, w 5. tion of D A (A	arrants Number	contai form of uired, Disp , options, c or 6. Date I and Exp e (Month/)	ined in this f displays a cu posed of, or Bo convertible sec Exercisable iration Date	orm are in the orm or are in the original or	not requir ralid OMB r Owned and of ng s	ed to resp control nu 8. Price of	ond unless	10. Ownersh Form of Derivativ Security: Direct (D or Indirec	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	4. Transac Code	salls, we state of the state of	Number of erivative ecurities cquired (A) or isposed (D) nstr. 3, 4	contained, Disposition, options, contained, Dispositions, contained, Disposition, options, contained, and Expired (Month/Month	ined in this fidisplays a cu posed of, or Br convertible sec Exercisable iration Date Day/Year)	orm are irrently veneficially urities)  7. Title a Amount Underlyi Securitie (Instr. 3 a	not requir ralid OMB r Owned and of ng s	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	10. Ownersh Form of Derivativ Security: Direct (E or Indirect)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

### **Reporting Owners**

D ( O N / 11)	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
CONGDON JOHN R JR C/O OLD DOMINION FREIGHT LINE, INC. 500 OLD DOMINION WAY THOMASVILLE, NC 27360	X	X		Member of Section 13(d) group	

## **Signatures**

/s/ Ross H. Parr, by Power of Attorney	06/03/2014
**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.
- (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.