FORM 4

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

OMB APPR	OVAL	
OMB Number:	3235-028	7
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

(Fint of Ty	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) X_ 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) 05/29/2015								Member o	of Section 13(l) group		
(Street) THOMASVILLE, NC 27360			4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ I	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City	y)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, l					, Dispose	Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code (Instr	. 8)		sed of (D)	Bene Repo (Inst	neficially	of Securities Owned Fol ansaction(s) 4)	lowing (Ownership form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder:	Report on a				,		Perso	ons who re lined in this displays a	form ar	e not	t requir	ed to resp	ond unless		1474 (9-02)
Reminder:	Report on a		Table II - I		Securit	ies Acq	Perso conta form uired, Dis	ined in this displays a posed of, or	form ar currently Beneficia	e not valid	t require	ed to resp	ond unless		1474 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II - I	4. Transac Code	Securitialls, was 5. tion of De Ad Di of (Ir	ies Acq arrants Numberivative curities equired) or sposed (D) astr. 3, 4	Persocontal form uired, Dis, options, or 6. Date and Expe (Month/	ined in thi displays a	form ar currently Beneficia	e not valid lly Ove e and nt of lying ties	t requirid OMB	ed to resp control nu 8. Price of	ond unless	10. Owners! Form of Derivati Security Direct (I or Indire	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - I (a) 3A. Deemed Execution Date, r)	4. Transac Code	Securitals, was a securital securitals. Securitals of the securital securital securitals of the securital securitar securital securitar securital securitar securita	ies Acq arrants Numberivativ curities equired) or sposed (D)	Persocontal Person National Pe	ined in thidisplays a posed of, or convertible Exercisable iration Date Day/Year) Expirati	Beneficia ecurities) 7. Title Amou Under Securi (Instr.	e notification of validation o	t requirid OMB	8. Price of Derivative Security	9. Number o Derivative Securities Beneficially Owned Following Reported Transaction(To. Owners! Form of Derivati Security Direct (l or Indirect) (I)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

D (O N (A))	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	06/01/2015
**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.