#### FORM 4

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

OMB APPROVAL
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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

| (Print or Ty  | pe Response   | s)                                 |  |                |  |       |                    |        |  |                      |  |  | 1                                    |   |   |                                    |                      |
|---|---|------------------------------------|--|----------------|--|-------|--------------------|--------|--|----------------------|--|--|--------------------------------------|---|---|------------------------------------|----------------------|
| Name and Address of Reporting Person * Overbey Cecil E. Jr. |   |                                    |  | OLI            | 2. Issuer Name and Ticker or Trading Symbol OLD DOMINION FREIGHT LINE, INC. [ODFL] |       |                    |        |  |                      |  | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X. Officer (give title below) Other (specify below)  SVP - Strategic Development |                                      |   |   |                                    |                      |
|   | ·   |                                    | (Middle)<br>GHT LINE,<br>WAY               |                | ite of Ear<br>19/2020  |       | Trans              | sactio | n (M   | Ionth/Day            | //Year)  |  |                                      | SVP - S   | strategic Dev                                   | relopment                          |                      |
| ТНОМА   | SVILLE, 1   | (Street)<br>NC 27360               |  | 4. If <i>i</i> | Amendm   | nent, | Date (             | Origi  | nal F  | iled(Month           | n/Day/Yea  | ar)  | _X_ Form fil                         | ed by One Repo  | Group Filing<br>orting Person<br>one Reporting  | •                                  | ble Line)            |
| (City   | ')  | (State)                            | (Zip)                                      |                |  | Ta    | ble I              | - Nor  | ı-De   | rivative S           | Securit  | ies Acqu   | ired, Disp                           | osed of, or I   | Beneficially                                    | Owned                              |                      |
| (Instr. 3) Date   |   |                                    | 2. Transaction<br>Date<br>(Month/Day/Year) | Executany      |  | e, if | Code<br>(Instr. 8) |        | tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                      | 5. Amount of Securities<br>Beneficially Owned Following<br>Reported Transaction(s) |  |                                      | Ownership of Form:  | Beneficial                                      |                                    |                      |
|   |   |                                    | (Month/Day/Year)                           |                | ear)   | Co    | de                 | V      | Amount   | (A)<br>or<br>(D)     | Price  | (Instr. 3 a  | str. 3 and 4)                        |   | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4)  | Ownership<br>(Instr. 4)            |                      |
| Common  | Stock   |                                    | 02/09/2020                                 |                |  |       | F                  | '      |  | 187                  | D  | \$<br>220.59   | 7,607                                |   |   | D                                  |                      |
| Common  | Stock   |                                    |  |                |  |       |                    |        |  |                      |  |  | 2,265                                |   |   | I                                  | By<br>401(k)<br>plan |
| Reminder:   | Report on a s   | separate line                      |  | Deriva         | ntive Sec  | uriti | es Ac              | quire  | Person<br>the  | sons wh<br>tained in | no responding this splays  | form ar<br>a curre   | e not requently valid                | OMB conf  | formation<br>spond unle<br>trol numbe           | ss                                 | 1474 (9-02)          |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)         | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transacti<br>Date<br>(Month/Day | on 3A. Deemed Execution Day                | ate, if        | 4. Transaction Code (Instr. 8)   |       | 5.                 |        | 6. Date Exercisable<br>and Expiration Date<br>(Month/Day/Year)         |                      | 7. T<br>Am<br>Und<br>Sec   | Title and ount of derlying urities ttr. 3 and  | Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s<br>(Instr. 4) | Owners Form o Derivat Securit Direct ( or India | Beneficia<br>Ownersh<br>(Instr. 4) |                      |
|   |   |                                    |  |                | Code   | V     | (A)                | (D)    | Dat<br>Exe   | -                    | Expirat<br>Date  | tion Titl  | Amount or Number of Shares           |   |   |                                    |                      |

## **Reporting Owners**

|  | Relationships |              |                             |       |  |  |  |
|--|---------------|--------------|-----------------------------|-------|--|--|--|
| Reporting Owner Name / Address   | Director      | 10%<br>Owner | Officer                     | Other |  |  |  |
| Overbey Cecil E. Jr.<br>C/O OLD DOMINION FREIGHT LINE, INC.<br>500 OLD DOMINION WAY<br>THOMASVILLE, NC 27360 |               |              | SVP - Strategic Development |       |  |  |  |

#### **Signatures**

| /s/ Cecil E. Overbey, Jr.     | 02/11/2020 |   |
|-------------------------------|------------|---|
| 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).

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.