FORM 4

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

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respon	se 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

1. Name ar																
Print or Type Responses) 1. Name and Address of Reporting Person *- LYNCH GEORGE M					2. Issuer Name and Ticker or Trading Symbol FORWARD AIR CORP [FWRD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 1915 SNAPPS FERRY ROAD, BUILDING N					3. Date of Earliest Transaction (Month/Day/Year) 11/02/2017							r (give title belo		Other (specify b	elow)	
(Street) GREENEVILLE, TN 37745			4. If	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)					Table I - Non-Derivative Securities Acqu							ired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)			Date	te onth/Day/Year)	any	tion Date, if	Code (Instr. 8)		(A) or Disposed of (D (Instr. 3, 4 and 5)			Beneficially Owned Follo Reported Transaction(s)		Following	6. Ownership Form:	Beneficial
					(Mont	h/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	Stock		11/02/2	2017			S		1,640		\$ 56.9978	12,383			D	
Reminder: indirectly.	Report on a	separate line	for each	class of sec	urities	beneficially	owned dir	ectly	or							
								con	ıtained i	n this f	form ar	e not req		formation spond unl itrol numb	ess	EC 1474 (9- 02)
						tive Securit		the	itained i form di	n this f splays of, or B	form are a curre	e not req ntly valid	uired to re	spond unl	ess	,
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day	on 3 Ev/Year) a	A. Deemed	(e.g., p) l late, if	4. Transaction Code	5. Number	the ed, E	tained i form dis Disposed s, conver Date Exert d Expirati	of, or B tible sectors able	eneficial curities) 7. T Ame	e not req ntly valid	uired to re d OMB cor	spond unl atrol numb	of 10. Owners: Form of Derivati Security Direct (i	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Reporting Owners

Describer Occasional Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LYNCH GEORGE M 1915 SNAPPS FERRY ROAD BUILDING N GREENEVILLE, TN 37745	X						

Signatures

/s/ Michael L. Hance, Attorney-in-Fact	11/06/2017
**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.