Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations

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

OMB APPROVAL OMB Number: 3235 Estimated average burden hours per response... 3235-0287 0.5

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

| • | ontinue. See tion 1(b). | 1.1 | | Inv | vestmen | t Compa | any Ac | et of 19 | 940 | | () . | | | | |
|---|--|--|---|---|------------|---|--|-----------------------|-----------------------------|--|---|---------------|----------------------------------|---|------------|
| | d Address o | rs) f Reporting Person | * | | | nd Ticke | | | vmbol | 5. | Relationshi | | ing Person(s) k all applicabl | | |
| McLean Michael P (Last) (First) (Middle) 430 AIRPORT ROAD | | | | FORWARD AIR CORP [FWRD] 3. Date of Earliest Transaction (Month/Day/Year) 03/14/2013 | | | | | | | Director10% Owner X_Officer (give title below) Other (specify below) VP & CAO | | | | |
| (Street) | | | | | | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person | | | | |
| GREENEV | VILLE, T | N 37745 | | | | | | | | | Form filed by | More than One | Reporting Person | | |
| (City) |) | (State) | (Zip) | | , | Гable I - | Non-Do | erivativ | e Securitie | s Acquire | d, Dispose | d of, or Ben | eficially Owr | ied | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | f (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | lowing C | Ownership Form: | 7. Nature of Indirect Beneficial Ownership | |
| | | | | · | | Code | v | Amoui | (A) or | Price | | | or Indire (I) (Instr. 4 | | (Instr. 4) |
| Common S | Stock | | 03/14/2013 | | | M | | 19,50 | · ` ' | | 28,392.638 | 33 | |) | |
| Common S | Common Stock 03/14/2013 | | 03/14/2013 | | | S 19,500 D | | 00 D \$ | 7.8388 | 8,892.6383 | | I |) | | |
| Common Stock 03/15/2013 | | | | M | | 5,500 |) A \$ | 31.65 | 14,392.6383 | | I |) | | | |
| Common Stock | | 03/15/2013 | | | S | | 5,500 | D \$ | 7.6256 | 8,892.6383 | | I |) | | |
| | | | | | | | forn | n displ Pisposed | lays a curi l of, or Ben | rently va | lid OMB c | ontrol nun | nd unless th | ie | |
| Security (Instr. 3) | f 2. 3. Transaction Conversion or Exercise Price of Derivative Security S | | 7. Title and Amount of Underlying | | | 9. Number o Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownersh Form of Derivati Security Direct (I or Indire | Ownersk (Instr. 4) | | | | | | | |
| | | | | Code | V (A) | (D) | Date Exerci | sable D | expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option (Right to Buy) | \$ 31.65 | 03/14/2013 | | М | | 19,500 | <u>(1</u> | <u>n</u> 0 | 2/11/2014 | Commo Stock | on | \$ 0 | 5,500 | D | |
| Stock Option (Right to Buy) | \$ 31.65 | 03/15/2013 | | М | | 5,500 | <u>(1</u> | 0 | 2/11/2014 | Commo | 1 2.200 | \$ 0 | 0 | D | |

Reporting Owners

| D (O N / /) | Relationships | | | | | | |
|--------------------------------|---------------|-----------|----------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| McLean Michael P | | | | | | | |
| 430 AIRPORT ROAD | | | VP & CAO | | | | |
| GREENEVILLE, TN 37745 | | | | | | | |

Signatures

| /s/ Michael P McLean | 03/18/2013 |
|-------------------------------|------------|
| 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) This option vests 33-1/3% each year over a three year period commencing on 2/11/08.

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.