FORM 4

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

| OMB APPROVAL | | | | | |
|-------------------------|-------|--|--|--|--|
| MB Number: 3235-028 | | | | | |
| stimated average burden | | | | | |
| ours per response | e 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

| (Print or Ty | pe Response | es) | | | | | | | | | | | | | | |
|--|---|---------------|--|---|------|--|----------------------|----------------------|---|---|---|------------------------|--|---|---|--|
| 1. Name and Address of Reporting Person *- BELL RODNEY L | | | | 2. Issuer Name and Ticker or Trading Symbol FORWARD AIR CORP [FWRD] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
| (Last) (First) (Middle) 430 AIRPORT ROAD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/25/2013 | | | | | | X Officer (give title below) Other (specify below) CFO, SVP & Treasurer | | | | | | |
| (Street) GREENEVILLE, TN 37745 | | | 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 | (City) (State) (Zip) | | | | | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of S (Instr. 3) | Security | | 2. Transaction Date (Month/Day/Year) | | | | f Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | | | 6. Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | (Month/Day/Year) | | Cod | e V | Amo | nount (A) or (D) Pri | | (Instr. 3 and | | | | | | |
| Common | Stock | | 04/25/2013 | | | M | | 2,20 | 0 A \$ | \$ 18.82 | 2 63,754.3545 | | | D | | |
| Common | Stock | | 04/25/2013 | | | S | | 2,20 | $D \begin{bmatrix} S \\ S \end{bmatrix}$ | § 37.2627 | 61,554.3545 | | | D | | |
| Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Ye | Execution Date, any (Month/Day/Yea | Code ar) (Instr. 8) Dei | | | | | on Date Day/Year) | | et of ying ies 3 and 4) | Security (Instr. 5) | Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Form of Derivati Security Direct (I or Indire | Owner y: (Instr. (D) ect | |
| | | | | Code | V (A | (D) | Date Exercis | | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Stock Option (Right to Buy) | \$ 18.82 | 04/25/2013 | | М | | 2,200 | <u>(1</u> | Ĵ | 02/04/2014 | Comm Stoc | . 12.200 | \$ 0 | 12,800 | D | | |
| Repor | rting O | wners | | | | | | | | | | | | | | |
| | | | | Relationsh | ine | | | | | | | | | | | |
| Reporting Owner Name / Address Director 10% Owner | | | Relationships Officer | | | Oth | ner | | | | | | | | | |
| BELL RODNEY L 430 AIRPORT ROAD GREENEVILLE, TN 37745 | | | CFO, SVP & Treasurer | | | | | | | | | | | | | |
| Siona | turos | | | | | | | | | | | | | | | |

Explanation of Responses:

/s/ Michael P. McLean, Attorney-in-Fact

**Signature of Reporting Person

- * 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).

04/29/2013 Date

At the time of grant, this option was scheduled to vest 25% each year over a four year period commencing on 2/4/05. As of 12/31/05, all options then outstanding became fully (1) exercisable as a result of the Board of Directors accelerating the vesting of all outstanding stock options awarded to employees, officers and non-employee directors under the Company's stock option award plans.

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. | |
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