FORM 4	-
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 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 Investment Company Act of 1940

(Third of Type Responses)											
1. Name and Address of Reporting Person GRAY ROBERT/TN	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) 430 AIRPORT ROAD		3. Date of Earliest Transaction (Month/Day/Year) 05/19/2004						Officer (give title below) O	ther (specify bel	ow)	
(Street)	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				
GREENEVILLE, TN 37745								rom ned by wore than one reporting reison			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security	2. Transaction	2A. Deemed 3. Transaction 4. Securities Acquired						5. Amount of Securities Beneficially		7. Nature	
(Instr. 3)	Date	Execution Date, if Code (A) or Disposed of (D)				Owned Following Reported	Ownership	of Indirect			
	(Month/Day/Year)	any (Instr. 8) (Instr. 3, 4 and 5)				Transaction(s)		Beneficial			
		(Month/Day/Year)						(Instr. 3 and 4)	Direct (D)		
									or Indirect	(Instr. 4)	
						(A) or			(I)		
			Code	V	Amount	(D)	Price		(Instr. 4)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Num	ıber	6. Date Exer	cisable and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	of		Expiration I	Date	Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivat	tive	(Month/Day	/Year)	Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securit	ies			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Acquir	red		(Instr. 3 and 4)		Owned	Security:	(Instr. 4)		
	Security					(A) or							Following	Direct (D)	
						Dispos	ed						1	or Indirect	
						of (D)							Transaction(s)		
						(Instr. 1	3, 4,						(Instr. 4)	(Instr. 4)	
						and 5)									
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
									Date		of				
				Code	V	(A)	(D)				Shares				
Stock															
Option										Common					
(Right to	\$ 30.3	05/19/2004		A		7,500		(1)	05/19/2014	Stock	7,500	\$ 0	7,500	D	
										SIOCK					
Buy)															

Reporting Owners

Demontine Original News (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
GRAY ROBERT/TN 430 AIRPORT ROAD GREENEVILLE, TN 37745	Х							

Signatures

By: /s/ Lera Doherty, Attorney in Fact	05/20/2004
**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 is a vesting schedule, 50% over 2 years commencing 5/19/05.

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.