FORM 4

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

| OMB APPROVAL | | | | | |
|--------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burden | | | | | |
| nours 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

| | pe Response | -, | | | | | | | | | | | | |
|---|---|--------------------------------------|---|--|-------------------------|-------|---|--|---|---|------------------|--|---|---|
| 1. Name and Address of Reporting Person * MUNDY RAY A | | | 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 430 AIRI | e) PORT ROA | (First) AD | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 05/13/2008 | | | | | r (give title belo | w) | Other (specify b | elow) | | |
| (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 | | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, it any (Month/Day/Year | f Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | V | V Amount (A) or (D) Price | | | | | (I) (Instr. 4) | (msu. 4) | |
| Common | Stock | | 05/13/2008 | | A | | 2,306 (1) | A | \$ 0 | 7,931 | | | D | |
| Reminder: indirectly. | Report on a | separate line f | or each class of secu | rities beneficially o | | Perso | ons who | this for | m ar | e not req | ction of in | | | EC 1474 (9- |
| | | | | | | | | piuys u c | Juile | riciy vanc | OMR con | trol numb | | 02) |
| | | | | erivative Securiti | • | | sposed o | f, or Bene | eficial | lly Owned | | trol numb | | 02) |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transactio Date (Month/Day/ | n 3A. Deemed Execution Da any | derivative Securities.g., puts, calls, was 4. te, if Transaction Code Year) (Instr. 8) | rrants, op 5. Number | 6. Da | sposed of converting the Exercises Expiration | f, or Beneible secure cisable on Date | 7. T Amo | itle and ount of | 8. Price of | 9. Number Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | of 10. Ownersl Form of Derivati Security Direct (1 or Indire | 11. Nature of Indirect Beneficial Ownership: (Instr. 4) |

Reporting Owners

| Daniel Carroll Name / Add | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| MUNDY RAY A 430 AIRPORT ROAD GREENEVILLE, TN 37745 | X | | | | | | |

Signatures

| /s/ Michael P. McLean, Attorney-in-Fact, Ray A. Mundy | 05/15/2008 | |
|---|------------|--|
| 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) Represents restricted stock awarded under the Forward Air Corporation Amended and Restated Non-Employee Director Stock Plan in a transaction exempt from Section 16(b) under Rule 16b-3. The stock fully vests one year from the 05/13/08 grant date.

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.

