## FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
Estimated average	burden
ours per response	0.5

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

(Print or Type Responses)

#### 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 and RUBLE C		Reporting Person		2. Issuer Nan FORWARD					~ .	ool		5. Relationshi		k all applica		
*****************				3. Date of Earliest Transaction (Month/Day/Year) 06/06/2018							X Officer (give title below) Other (specify below)  President - Expedited Services					
(Street) GREENEVILLE, TN 37745										6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person						
GREENE (City)		(State)	(Zip)													
		. ,		ı							-	ired, Disposed	l of, or Ben	eficially Ow	ned	•
1.Title of Se (Instr. 3)	ecurity			2A. Deemed Execution Da any (Month/Day/)	te, if	3. Trans Code Instr. 8		(	4. Securi (A) or D (Instr. 3,	isposed	of (D)	5. Amount of Owned Follo Transaction(s (Instr. 3 and 4	wing Report			7. Nature of Indirect Beneficia Ownershi
				(Month/Day/	rear)	Code		v	Amount	(A) or (D)	Price	(mstr. 3 and 2	<del>'</del> )			(Instr. 4)
Common	Stock		06/06/2018			M		2	2,282	A	\$ 50.71	24,755.836	5		D	
Common	Stock		06/06/2018			M		3	3,126	A	\$ 43.67	27,881.836	5		D	
Common	Stock		06/06/2018			M		3	3,033	A	\$ 47.82	30,914.836	5		D	
Common	Stock		06/06/2018			S		,	7,969	D	\$ 60.5	22,945.836	5		D	
Common	Stock											29			I	By Son
Reminder: F	Renort on a s	enarate line for eac	ch class of securities	s beneficially o	wned o	directly	or ir	ndire	ctly							
Temmer. 1	report on a	eparate fine for each	on class of securities	, conclicially c	wheat	uncerry	Pe	erso	ns who			ne collection				C 1474 (9-0
												not required ralid OMB co			he	
							_				_					
				Derivative Sec e.g., puts, call								Owned				
Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transaction Code (Instr. 8)	5. Num	nber 6. E (I) tive (I) ties red	. Date xpira	e Ex	ercisable Date Dy(Year)	e and		es		9. Number Derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	Owner Form Deriva Securi Direct or Ind	ttive Owne ty: (Instr. (D)
												Amount				

	or Exercise Price of Derivative Security	(Month/Day/Year)	any (Month/Day/Year)	Code (Instr. 8	)	Sector (A)  Dispose (I)	urities quired or posed D) ttr. 3, 4,	(Month/Day	r/Year)	Securities (Instr. 3 an	d 4)	Security (Instr. 5)	Beneficially Owned	Derivative Security: Direct (D) or Indirect	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 50.71	06/06/2018		М			2,282	(1)	02/09/2022	Common Stock	2,282.00	\$ 0	0	D	
Stock Option (Right to Buy)	\$ 43.67	06/06/2018		M			3,126	(2)	02/08/2023	Common Stock	3,126.00	\$ 0	3,126	D	
Stock Option (Right to Buy)	\$ 47.82	06/06/2018		M			3,033	<u>(3)</u>	02/06/2024	Common Stock	3,033.00	\$ 0	6,065	D	

## **Reporting Owners**

D			Relationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
RUBLE CHRIS C 1915 SNAPPS FERRY ROAD BUILDING N GREENEVILLE, TN 37745			President - Expedited Services	

Sig	gnatures	
/s/ 1	Michael L. Hance, Attorney-in-Fact	06/08/2018
	**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 2/9/16.
- (2) This option vests 33-1/3% each year over a three year period commencing on 2/8/17.
- (3) This option vests 33-1/3% each year over a three year period commencing on 2/6/18.

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.