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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

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 Type Response	es)																		
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) 06/05/2014								X	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)			T	Table I - I	Non-Do	erivati	ve Securi	ities Acc	luired	, Disposed	d of, or Ben	eficially Ow	ned						
1.Title of Security (Instr. 3)		Da	Transaction ate Ionth/Day/Year)	2A. Deemed Execution Date r) any (Month/Day/Ye			3. Transa Code (Instr. 8)		(A) or	recurities Acquired or Disposed of str. 3, 4 and 5)		f(D) Beneficial		f Securities Owned Fol ansaction(s) 4)	6. Ownership Form: Direct (D) or Indirect (I)	p of l Bei	neficial nership		
							Code	V	Amou	int (D)	Price \$					(Instr. 4)	+		
Common Stock		06	5/05/2014				M		14,82	29 A	28.97	33 87	87,007.8404			D			
Common Stock		06	5/05/2014			S		14,82	29 D	\$ 44.55	72,178.840		04		D				
Reminder: Report on a	separate line	for each	class of securitie	s benefic	ially ov	vne	ed directly	y or ind	lirectly.	Г									
								con	tainec	l in this	form a	re not	required	n of inforn d to respo ontrol nur	nd unless		2 147	4 (9-02)	
			Table II -	Derivativ									wned						
1. Title of Derivative Conversion Security (Instr. 3) Price of Derivative Security	3. Transaction Date (Month/Day/	Year)	*	Transaction of Code Deri (Instr. 8) Secu Acq (A) Disp (D)			Expira (Montl urities uired or posed of tr. 3, 4,		Exercisable and ion Date //Day/Year)		Am Und Sec	itle an ount of ount of ount of ount of our of our	f g	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	of ative ty: (D) irect	11. Natu of Indire Benefic Owners (Instr. 4	
				Code	V	A)	(D)	Date Exerci	sable I	Expiration Date	n Titl	e	Amount or Number of Shares						
Stock Option \$ (Right to 28.9733 Buy)	06/05/20	014		М			14,829	<u>(1</u>	D) (02/14/20	וכונ	mmoi tock	14,829	\$ 0	75,000	D			
Reporting O	wners																		
			1	Relations	hips														
Reporting Owner Name / Address Director 10% Owner								Otho	er										
BELL RODNEY L 430 AIRPORT ROAD GREENEVILLE, TN 37745			CFO, SVP & Treasurer																
Signatures																			
/s/ Michael P. McL		y-in-F	act	06/09/20)14														
-Signature of	Reporting Person			Date															
Explanation	of Res	pons	ses:																

- * 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).
- At the time of grant, this option was scheduled to vest 25% each year over a four year period commencing on 2/14/06. 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.	