## Edgar Filing: MARTEN TRANSPORT LTD - Form 4

MARTEN TR Form 4 July 01, 2014	RANSPORT LTI	)									
FORM	Δ								OMB APPROVAL		
FORM 4 UNITED STATES SE				SECURITIES AND EXCHANGE CO Washington, D.C. 20549				COMMISSION	OMB Number:	3235-0287	
Check this if no longe	ar.								Expires:	January 31, 2005	
subject to Section 16	F CHANGES IN BENEFICIAL OWNERSHI SECURITIES					NERSHIP OF	Estimated average burden hours per				
Form 4 or Form 5 Filed purcuant to Section 16					а		1	A ( C1024	response	0.5	
obligations may contin <i>See</i> Instruct 1(b).	s Section 17(a	a) of the l		ility Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Section 40	n		
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person * Hinnendael James J2. Issuer Symbol				er Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			MARTE [MRTN]	N TRAN	SPORT	LTD		(Check all applicable)			
129 MARTEN STREET(Month/E(Street)4. If Ame			(Month/Da	3. Date of Earliest Transaction Month/Day/Year) )6/30/2014				Director 10% Owner XOfficer (give titleOther (specify below) below) Chief Financial Officer			
				Amendment, Date Original (Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
MONDOVI,	WI 54755							_X_ Form filed by C Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any		3. Transactic Code (Instr. 8)	Disposed	l (A) o l of (D	)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	06/30/2014			Code V A	Amount 9.47 (1)	or (D) A	Price \$ 0	(Instr. 3 and 4)	D		
Stock	rt on a senarate line	for each a	ass of secur	ities benefi	_	ed dir	octly or	indirectly			

whed directly or indirectly

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Addı	·ess	Relationships							
I B	Director	10% Owner	Officer	Other					
Hinnendael James J 129 MARTEN STREET MONDOVI, WI 54755			Chief Financial Officer						
Signatures									
/s/ James J. Hinnendael	07/01/2014								
**Signature of Reporting	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 dividend equivalent rights that accrued on June 30, 2014.

Includes: (i) 1,200 shares granted under a Performance Unit Award Agreement that vest on 12/31/2014 through 12/31/2018, (ii) 1,440 shares granted under a Performance Unit Award Agreement that vest on 12/31/2014 through 12/31/2017, (iii) 540 shares granted under a

(2) Performance Unit Award Agreement that vest on 12/31/2014, (iv) 720 shares granted under a Performance Unit Award Agreement that vest on 12/31/2014 through 12/31/2015, (v) 1,058 shares granted under a Performance Unit Award Agreement that vest on 12/31/2014 through 12/31/2016 and (vi) 8,471.30 shares that the reporting person has deferred under the Issuer's deferred compensation plan.

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.

Person