Edgar Filing: MARTEN TRANSPORT LTD - Form 4

MARTEN TF Form 4 October 01, 2	RANSPORT LTD)									
FORM	Л								OMB A	PPROVAL	
-	AITIES AND EXCHANGE COMM Shington, D.C. 20549 GES IN BENEFICIAL OWNERSE SECURITIES				COMMISSION	OMB Number:	3235-0287				
Check this box if no longer subject to Section 16. Form 4 or					NERSHIP OF	Expires: January 3 Expires: 20 Estimated average burden hours per response 0					
Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed purs s Section 17(a) of the Pub	blic Uti		ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40		0.5	
(Print or Type R	esponses)										
KOHL TIMOTHY M Symbol			ymbol	ssuer Name and Ticker or Trading ool RTEN TRANSPORT LTD				5. Relationship of Reporting Person(s) to Issuer			
[MRTN								(Check all applicable)			
(Last) (First) (Middle) 3. Date of			Date of l /onth/Da	of Earliest Transaction /Day/Year) /2015				Director 10% Owner Officer (give title Other (specify below) President			
				f Amendment, Date Original cd(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MONDOVI,	WI 54755								More than One Re		
(City)	(State) (2	Zip)	Table	I - Non-De	erivative S	lecuri	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if		Date, if	3.4. SecuritiesTransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)(A)			SecuritiesIBeneficially(OwnedI	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	09/30/2015			Code V A	Amount 25.87 (1)	or (D) A	Price \$ 0	(Instr. 3 and 4)	D		

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

Persons who respond to the collection of information 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 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. tionNumber 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 Owne Follo Repo Trans (Instr
				Code V	/ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Edgar Filing: MARTEN TRANSPORT LTD - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships						
reporting of the real of the	Director	10% Owner	Officer	Other			
KOHL TIMOTHY M							
129 MARTEN STREET			President				
MONDOVI, WI 54755							
Signatures							
/s/ James J. Hinnendael, attorney-in-fact		10/01/2	2015				
**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 dividend equivalent rights that accrued on September 30, 2015.

Includes: (i) 2,100 shares granted under a Performance Unit Award Agreement that vest on 12/31/2015 through 12/31/2019; (ii) 1,740 shares granted under a Performance Unit Award Agreement that vest on 12/31/2015 through 12/31/2018, (iii) 1,957 shares granted under

(2) a Performance Unit Award Agreement that vest on 12/31/2015 through 12/31/2017, (iv) 600 shares granted under a Performance Unit Award Agreement that vest on 12/31/2015, (v) 1,275 shares granted under a Performance Unit Award Agreement that vest on 12/31/2015 through 12/31/2016 and (vi) 16,757.29 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.