### Edgar Filing: DEMOREST ROBERT L - Form 4

DEMORES	T ROBERT L										
Form 4											
March 19, 2	019										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box							Expires:	January 31,			
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Estimated average			
Section 16. SECURITIES							burden hours per				
Form 4 o Form 5					1 9		- 1		response	0.5	
obligatio	-						-	Act of 1934,			
may con	tinue. Section 17			•	•	-	t of 1940	1935 or Section			
See Instr 1(b).	uction	50(II)		ivestiller	n Compa	iiy Ao	<b>CI UI 194</b> 0	)			
1(0).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and Ticker or Trading 5. Relationship of I								Reporting Pers	on(s) to		
DEMOREST ROBERT L Symbol								5. Relationship of Reporting Person(s) to Issuer			
MARTEN TRANSPORT LTD											
[MRTN								(Check all applicable)			
(Last)	(First) (	Middle)	3. Date o	f Earliest 7	Fransaction		-	_X_ Director		Owner	
				th/Day/Year)			-	Officer (give title Other (specify below) below)			
129 MART	EN STREET		03/15/2	.019				,			
(Street)			4. If Amendment, Date Original				(	6. Individual or Joint/Group Filing(Check			
			Filed(Mo	nth/Day/Ye	ar)			Applicable Line)	- Denertine De		
MONDOVI	I WI 54755						-	_X_ Form filed by Or Form filed by Mo			
WONDOV	I, WI 54755						]	Person			
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of	2. Transaction Date	A. Deem	ed	3. 4. Securities Acquired (A) Transactions Disposed of (D)					6.	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if					Securities	Ownership	Indirect	
(Instr. 3)		any (Month/Da	Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)					Beneficially Owned	Form: Direct (D)	Beneficial Ownership	
		(		(				Following	or Indirect	(Instr. 4)	
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
				<i>a</i>		or		(Instr. 3 and 4)	(11150.4)		
Common				Code V	Amount	(D)	Price	× ,			
Stock	03/15/2019			Μ	6,250	А	\$ 7.988	20,666	D		
							¢				
Common	03/15/2019			S	6,250	D	\$ 18.0499	14,416	D		
Stock							18.0499				

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.

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# 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. Transactic Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. H Der Sec (In:
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 7.988	03/15/2019		М	6,250	<u>(1)</u>	05/05/2019	Common Stock	6,250	

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
Reporting Owner Paulie / Pauless	Director	10% Owner	Officer	Other			
DEMOREST ROBERT L 129 MARTEN STREET MONDOVI, WI 54755	Х						
Signatures							
/s/ Kathy Degenhardt, attorney-in-fact	03/19/2019						
**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 has fully vested.

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.