Edgar Filing: KNIGHT KEVIN P - Form 4

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Form 4											
FORN									OMB AF	PROVAL	
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWN SECURITIES					Estimate burden h response		•	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type I	Responses)										
KNIGHT KEVIN P Symbol KNIGH			Symbol	er Name and Ticker or Trading HT TRANSPORTATION INC]				5. Relationship of Reporting Person(s) to Issuer			
			KNIGH [KNX]					(Check all applicable)			
(Last)(First)(Middle)3. Date of (Month/D)5601 WEST BUCKEYE ROAD08/05/20			-				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) below) Chief Executive Officer				
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
PHOENIX,	X1 85043							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Securi	ities Acq	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		Code (Instr. 8)	4. Securit or(A) or Dis (Instr. 3, 4	sposed 4 and 5 (A) or	l of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$0.01 per share	08/05/2005			Code V	Amount 72,265	(D) A	Price \$ 23.43 (1)	4,390,023	I <u>(2)</u>	Trust (2)	

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

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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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Under Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
KNIGHT KEVIN P 5601 WEST BUCKEYE ROAD PHOENIX, X1 85043	Х		Chief Executive Officer				
Signaturos							

Signatures

/s/ Kevin P.	12/28/2005
Knight	12/20/2003

<u>**</u>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) Liquidation from limited partnership exchange fund in which Mr. Knight was a member, but not a controlling member.

The total number of shares beneficially owned by Mr. Knight after the reported transaction includes shares held directly by Mr. Knight, shares owned by Mr. Knight over which he and his wife exercise sole voting power pursuant to a revocable living trust, shares

(2) shales owned by Mr. Knight over which he and ms whe exercise sole voting power pursuant to a revocable nying flux, shales beneficially owned by Mr. Knight held by an entity which he controls, shares held by a charitable foundation over which Mr. Knight exercises sole voting power on behalf of the foundation, and shares owned by a minor child living in the same household.

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.