TURNER JOHN H Form 4 April 01, 2019

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

1 Name and Address of Departing De

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

1(b).

Common

Stock

03/29/2019

(Print or Type Responses)

TURNER JO	OHN H	Symbol MARTI	2. Issuer Name and Ticker or Trading Symbol MARTEN TRANSPORT LTD [MRTN]			Issuer (Check all applicable)			
(Last)	, , , , ,	iddle) 3. Date of (Month/D	f Earliest Tra Day/Year)	nnsaction	Director 10% Owner X Officer (give title Other (specify below)				
129 MARTI	EN STREET	03/29/2	019		Senior Vice President of Sales				
	(Street)	4. If Ame	ndment, Dat	te Original	6. Individual or Joint/Group Filing(Check				
		Filed(Mor	Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
MONDOVI	, WI 54755				Person	More than One Ro	eporting		
(City)	(State) (Z	Zip) Tabl	e I - Non-D	erivative Securities Acc	quired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	4. Securities onAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price	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)		

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

62,542.33 (2) D

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

53.95

(1)

\$0

A

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1. Title o	of 2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	e and	8. Price of	9. Nu
Derivativ	ve Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ties	(Instr. 5)	Bene
	Derivative		•		Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
					, ,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title Nun	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

TURNER JOHN H 129 MARTEN STREET MONDOVI, WI 54755

Senior Vice President of Sales

Signatures

/s/ James J. Hinnendael, attorney-in-fact 04/01/2019

**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) Represents dividend equivalent rights that accrued on March 29, 2019.
 - Includes: (i) 2,360 shares granted under a Performance Unit Award Agreement that vest on 12/31/2019 through 12/31/2022; (ii) 4,450 shares granted under a Performance Unit Award Agreement that vest on 12/31/2019 through 12/31/2021; (iii) 766 shares granted under a
- (2) Performance Unit Award Agreement that vest on 12/31/2019 through 12/31/2020; (iv) 391 shares granted under a Performance Unit Award Agreement that vest on 12/31/2019; and (v) 32,117.33 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.

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