Edgar Filing: GARNREITER MICHAEL - Form 4

GARNREIT	TER MICHAEL										
Form 4											
June 12, 200											
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
UNITED STATES SECURITIES							ANGE CO	OMMISSION	OMB Number:	3235-0287	
Check this box				·				Expires:	January 31,		
if no longer subject to STATEMENT OF				IGES IN	BENE	FICI/	AL OWN	ERSHIP OF	Estimated average		
Section 16. SE					RITIES			burden hours per			
	Form 4 or							response 0.5			
Form 5	Filed put	rsuant to S	Section 1	16(a) of the	ne Securi	ities I	Exchange	e Act of 1934,			
obligatio may con		(a) of the I	Public U	tility Hol	ding Co	mpan	y Act of	1935 or Section	1		
See Insti		30(h)	of the In	nvestment	t Compa	ny Ao	ct of 1940	0			
1(b).											
(Drint or Tring	Deemenaae										
(Print or Type	Kesponses)										
1. Name and A	Person *	2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to				
GARNREITER MICHAEL			Symbol	i i tunic un	a mener o	i iiuu		Issuer			
		KNIGHT TRANSPORTATION INC									
			[KNX]					(Check all applicable)			
(Last)	(First) (Middle)	3. Date o	of Earliest T	ransaction			_X_ Director	10%	Owner	
			(Month/Day/Year)					Officer (give title Other (specify			
5601 WEST BUCKEYE ROAD			06/10/2009					below) below)			
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
		Filed(Month/Day/Year)					Applicable Line)				
								X Form filed by O			
PHOENIX,	, AZ 85043							Form filed by M Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Dorivativa	Secu	rities Acau	iired, Disposed of,	or Bonoficial	ly Owned	
1 THf	2 Transaction Date	24 D					-	· • ·		•	
1.Title of Security	2. Transaction Date (Month/Day/Year)	Execution		3. Transactio	4. Securities Acquired (A ionor Disposed of (D)) 5. Amount of Securities	6. Ownership	 Nature of Indirect 	
(Instr. 3)	(Wollin Duy Tour)	any	Dute, II	Code (Instr. 3, 4 and 5)				Beneficially	Form:	Beneficial	
		(Month/Da	ay/Year)					Owned	Direct (D) or Indirect	Ownership	
								Following	(Instr. 4)		
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
				Cada V	A	or	Duine	(Instr. 3 and 4)	(1115111-1)		
Common				Code V	Amount	(D)	Price				
Stock, par											
value	06/10/2009			S	3,219	D	\$	1,040	D		
\$0.01 per	00/10/2007			5	5,217	D	18.0113	1,010	D		
share											
share											

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)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl 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			
GARNREITER MICHAE 5601 WEST BUCKEYE I PHOENIX, AZ 85043	-	Х						
Signatures								
/Michael								
Garnreiter/	06/12/	2009						
**Signature of Reporting Person	Da	ate						
— • • • •	-							

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).

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.