Edgar Filing: KNIGHT TRANSPORTATION INC - Form 4

| KNIGHT TR Form 4 May 24, 2005 | ANSPORTATIO | ON INC | | | | | | | | | |
|---|---|-----------------|---|--|----------------------------------|-----------------------------|--|--|--|------------------------|--|
| • | | | | | | | | | OMB AI | PPROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549 | | | | | | COMMISSION | OMB Number: | 3235-0287 | | | |
| Subject to Section 16. Form 4 or | | | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934. | | | | | | Expires: January 3 200 Estimated average burden hours per response 0 | | |
| obligation may conti <i>See</i> Instru 1(b). | nue. Section 17(| a) of the | Public Ut | • • | ing Com | ipany | Act of | f 1935 or Sectio | n | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| KNIGHT L RANDY Symbol KNIG | | | Symbol | er Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) 5601 WEST | (First) (1 BUCKEYE RO | Middle) | | - | ansaction | | | X Director Officer (give below) | | • Owner er (specify | |
| | | | ndment, Date Original hth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | | |
| PHOENIX, | AZ 85043 | | | | | | | Form filed by M Person | Iore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | Securi | ities Acc | uired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Executio any | | 3. Transactic Code (Instr. 8) | on(A) or Di (D) (Instr. 3, | spose 4 and (A) or | d of 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) | | |
| Common Stock, par value \$0.01 per share | 05/20/2005 | | | Code V P | | (D) A | Price \$ 24.7 | 4,574,457 | I | Trust (1) | |

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) | 4. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|--|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | |
|--|----------|---------------|---------------|--|--|--|--|--|
| | Director | 10% Owner | Officer Other | | | | | |
| KNIGHT L RANDY 5601 WEST BUCKEYE R PHOENIX, AZ 85043 | OAD | Х | | | | | | |
| Signatures | | | | | | | | |
| /s/ Randy 05/24 Knight | | 4/2005 | | | | | | |
| <u>**</u> Signature of | 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).
- Shares are held in trust, by a limited liability company for which Mr. Knight acts as manager and whose members include Mr. Knight and(1) trusts for the benefit of his four children, and by a child who shares the same household and over which Mr. Knight exercises voting power.

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.

Reporting Person