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PAM TRANSPORTATION SERVICES INC

Form 4 March 18, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Check this box

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * West Allen

(First)

(Street)

(State)

2. Issuer Name and Ticker or Trading

Symbol

PAM TRANSPORTATION SERVICES INC [PTSI]

3. Date of Earliest Transaction

(Month/Day/Year) 11/14/2014

C/O P.A.M. TRANSPORTATION SERVICES, INC., PO BOX 188

(Middle)

(Zip)

4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

Issuer

(Check all applicable)

Director 10% Owner Other (specify X_ Officer (give title below)

VP Finance, CFO, Secy, Treas

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

TONTITOWN, AR 72770

| (City) | (State) (Z | Table | e I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | |
|------------------------|--------------------------------------|-------------------------------|--|---|-----------|----------------------------|----------------------------|---------------------------|-----------------------|--|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. Transactio | 4. Securities nAcquired (A) or | | | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect | |
| (Instr. 3) | | any | Code | de Disposed of (D) str. 8) (Instr. 3, 4 and 5) | | | Beneficially | (D) or | Beneficial | |
| | | (Month/Day/Year) | (Instr. 8) | | | Owned Following | Indirect (I) (Instr. 4) | Ownership (Instr. 4) | | |
| | | | | | | Reported Transaction(s) | | | | |
| | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 11/14/2014 | | D | 1,250 | D | \$0 | 0 | D | | |
| Common Stock | 11/14/2014 | | A | 1,250 | A | \$0 | 1,250 | D | | |

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 | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exerc | cisable and | 7. Titl | le and | 8. Price of | 9 |
|---|-------------|---------------------------------------|---------------------|-------------------------|-------------------|------------|--|-------------|--|---------------------|-------------|---|
| | Derivative | Conversion or Exercise Price of | (Month/Day/Year) | Execution Date, if | TransactionNumber | | Expiration Date | | Amount of | | Derivative | J |
| | Security | | | any (Month/Day/Year) | Code | of | of (Month/Day/Year) Derivative Securities Acquired | | Underlying Securities (Instr. 3 and 4) | Security (Instr. 5) | , | |
| í | (Instr. 3) | | | | (Instr. 8) | Derivative | | | | |] | |
| | | Derivative | | | | Securities | | | | | (| |
| | | Security | | | | Acquired | | | | | | J |
| | | | | | | (A) or | | | | | | J |
| | | | | | | Disposed | | | | | | - |
| | | | | | | of (D) | | | | | | (|
| | | | | | | (Instr. 3, | | | | | | |
| | | | | | | 4, and 5) | | | | | | |
| | | | | | | | | | | Amount | | |
| | | | | | | | | | | Amount | | |
| | | | | | | | Date | Expiration | | or Number | | |
| | | | | | | | Exercisable | Date | Title | of | | |
| | | | | | C-1- 1 | 7 (A) (D) | | | | | | |
| | | | | | Code V | (A) (D) | | | | Shares | | |

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

West Allen C/O P.A.M. TRANSPORTATION SERVICES, INC. PO BOX 188 TONTITOWN, AR 72770

VP Finance, CFO, Secy, Treas

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Signatures

/s/ C. Douglas Buford , Jr., As attorney in fact for Allen West

03/18/2015

**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).

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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