Edgar Filing: MEE DAVID G - Form 4

MEE DAVII Form 4	D G										
November 02	2, 2007										
FORM			CECUD				NCEO	OMMISSION		PROVAL	
	UNITED S	DIAIES		shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check the			v v etc	,g.on,	D .C. 2 0	017			Expires:	January 31	
if no long subject to Section 1 Form 4 o	6. SIAIEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Estimated average burden hours per response 0.8	
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)										
1. Name and Address of Reporting Person <u>*</u> MEE DAVID G			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
		HUNT J B TRANSPORT SERVICES INC [JBHT]					(Check all applicable)				
(Last)	(Month/I				ansaction			Director10% Owner Officer (give titleXOther (specify below) below)			
DRIVE	INT CORPORAT	E	11/01/20	007				Sr. VP, Ta	x/Risk Manage	ement	
				ndment, Da nth/Day/Year)	-	1		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
						Form filed by M	More than One Reporting				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	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. 3, 4 an Tear) (Instr. 8) (A		ispose 4 and (A)	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
401(k)	11/01/2007	11/01/2	007	W	3,223	D	\$ 26.96	4,246	D		
Common Stock								57,530	D		

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.

Edgar Filing: MEE DAVID G - Form 4

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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) 		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock	\$ 0	11/01/2007	11/01/2007	A <u>(1)</u>	17,000	07/15/2015	08/15/2015	Common Stock	17,000
Right to Buy Stock Option	\$ 3.125					06/01/1999	10/08/2009	Common Stock	2,000
Right to Buy Stock Option	\$ 5.585					06/01/2002	02/07/2013	Common Stock	32,000
Right to Buy Stock Option	\$ 7.08					06/01/2004	10/24/2013	Common Stock	33,336
Right to Buy Stock Option	\$ 12.2					06/01/2009	10/23/2014	Common Stock	32,000
Right to Buy Stock Option	\$ 20.365					06/01/2012	10/21/2015	Common Stock	32,000

Reporting Owners

Date

Reporting Owner Name / Address		Relationships					
F	Director	10% Owner	Officer	Other			
MEE DAVID G 615 J.B. HUNT CORPORATE DRIV LOWELL, AR 72745	VE			Sr. VP, Tax/Risk Management			
Signatures							
Debbie 11/02/2 Willbanks	007						

<u>**</u>Signature of Reporting Person

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).
- The Restricted Stock award, approved by the Company's Compensation Committee, vests over an eight-year period. There is no
 purchase price required by the recipient in connection with this award. Termination of the recipient's employment for any reason other than death or disability shall result in forfeiture of the award on the date of termination.

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.