## Form **8937**(December 2017) Department of the Treasury Internal Revenue Service

## Report of Organizational Actions Affecting Basis of Securities

► See separate instructions.

OMB No. 1545-0123

Part I Reporting	Issuer			
1 Issuer's name		2 Issuer's employer identification number (EIN)		
~				0/ 075/407
The Options Clearing Co		4 Talanhaa	a bla as anniant	36-2756407 5 Email address of contact
3 Name of contact for a	aditional information	4 Felephon	e No. of contact	5 Email address of contact
Thomas Crider			312.322.6200	Form8937@theocc.com
6 Number and street (or	P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contac		
125 C Franklin Stroot Su	ito 1200			Chicago II 40404
125 S. Franklin Street Su 8 Date of action	ne 1200	Chicago, IL 60606		
bate of action		0 0,000	sification and description	
March 28, 2024		Options	on shares of Old Dominion Fi	reight Line, Inc.
10 CUSIP number	11 Serial number(	s)	12 Ticker symbol	13 Account number(s)
	All serie		ODFL/2ODLF	
				back of form for additional questions.
				against which shareholders' ownership is measured for
				ht Line, Inc. (ODFL) is replaced by 2 contracts to
reflect a 2-for-1 share spl	it. Effective date is iv	iarch 28, 202	4.	
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				· · · · · · · · · · · · · · · · · · ·
				in the hands of a U.S. taxpayer as an adjustment per sallocated to each of the 2 replacement contracts.
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	-		• •	on, such as the market values of securities and the ss the replacement contracts.
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Par		Organizational Action (contin	nued)						
17	List the	e applicable Internal Revenue Code s	ection(s) and subsection(s) upon w	hich the tax treatment is based ▶	Section 1012 (a)				
			11.00.000 10.00 10.00 10.00 10.00						
18	Can an	y resulting loss be recognized? ► N	lo.						
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19	Provide	any other information necessary to	implement the adjustment, such as	the reportable tay year					
13	i iovide	sarry other information necessary to	amplement the adjustment, such as	the reportable tax year -					
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	belie	er penalties of perjury, I declare that I hav if, it is true, correct, and complete. Declara	e examined this return, including accor tion of preparer (other than officer) is ba	npanying schedules and statements, ised on all information of which prepa	and to the best of my knowledge and irer has any knowledge.				
Sign		belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.							
Here	0:	ature > / Momos (	Till 1	Date ► 4/19	12024				
	Sign	ature 7/2 Contact C		Date	72027				
	Delet	your name▶ Thomas Crider		Tillo E Evocation	Director				
<u> </u>		Print/Type preparer's name	Preparer's signature	Title ► Executive  Date	— DTM				
Paid		1			Check if FINA self-employed				
	arer		1	1	Firm's EIN ▶				
use	Only	Firm's address			Phone no.				
Send	len, UT 84201-0054								