## Edgar Filing: REAVES CHARLES R - Form 4

REAVES CH	IARLES R									
Form 4										
January 03, 2	005									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
	UNITED		URITIES A Vashington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi								Expires:	January 31,	
subject to statement of changes of the statement of the s				BENEF	[CIA]	LOW	NERSHIP OF	Estimated a	2005 average	
Section 1	б.	S						burden hou		
Form 4 or Form 5								response	0.5	
obligation	· ·					-	ge Act of 1934,			
may conti			•	•	· ·		f 1935 or Sectio	n		
See Instru	ction	30(h) of the	Investment	Compan	y Aci	l 01 194	40			
1(b).										
(Print or Type R	(esponses)									
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to					
REAVES CI	bol B GROUP INC [HUBG]				Issuer					
HUB GF					(Check all applicable)					
(Last)	(First) (M	liddle) 3. Date	e of Earliest Tr	ansaction			(Chee	.k an appneabl	-)	
			n/Day/Year)			X Director		Owner		
3050 HIGHLAND 12/30/20			/2004				Officer (give below)	give title Other (specify below)		
PARKWAY	, SUITE 100									
			mendment, Da	ndment, Date Original			6. Individual or Joint/Group Filing(Check			
			/Ionth/Day/Year	)			Applicable Line)			
DOWNEDO	CROVE H (05	1.5					_X_ Form filed by ( Form filed by N	One Reporting Pe More than One Re		
DOWNERS	GROVE, IL 605	15					Person		1 0	
(City)	(State) (	(Zip) T	able I - Non-D	<b>Derivative</b>	Securi	ities Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date		3.				5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	Execution Date,		Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially	Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership	
(IIIsu. 5)		any (Month/Day/Yea								
		` <b>`</b>	, , , ,	· · ·			Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported Transaction(s)			
					or		(Instr. 3 and 4)			
Class A			Code V	Amount	(D)	Price	(			
Class A Common	12/30/2004		А	1,158	А	\$	4,718 (2)	D		
Stock	12/30/2004		A	(1)	A	51.8	<del>,</del> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt 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		

## **Reporting Owners**

<b>Reporting Owner Name / Addre</b>	255	Relationships						
	Director	10% Owner	Officer	Other				
REAVES CHARLES R 3050 HIGHLAND PARKWA SUITE 100 DOWNERS GROVE, IL 605	Х							
Signatures								
/s/ Charles R. Reaves	01/03/2005							
**Signature of	Date							

<u>Signature of</u> 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).
- (1) Restricted stock subject to a vesting schedule. The restricted stock grant was approved by the Board of Directors of Hub Group, Inc. on December 30, 2004
- (2) 3,531 shares of Class A Common Stock are part of a restricted stock grant subject to vesting requirements.

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.