FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
l	Estimated average burde	en							
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Anderson Scott T  (Last) (First) (Middle)							2. Issuer Name and Ticker or Trading Symbol RUSH ENTERPRISES INC \TX\ [ RUSH ]  3. Date of Earliest Transaction (Month/Day/Year) 03/15/2013									5. Relationship of Reporting Person(s) to (Check all applicable)  Director 109  X Officer (give title below)  Senior Vice President				
555 IH 35 SOUTH, SUITE 500  (Street)  NEW  BRAUNFELS  TX  78130  (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - Noi	n-Deriv	vativ	e Se	curities	s Ac	quired,	Disp	osed o	f, or Be	neficia	ılly (	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amour Securitie Beneficia Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	Price		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Class B Common Stock 03/15/						2013		A		8,000	1) A	\$	0	8,000			D			
Class A C	Common St	ock		03/1	5/201	.3			F		328	D	\$2	5.7	16,0	D D				
		-	Table II -								sed of, onvertil				wned					
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/Yea	Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Ex Expiration (Month/Da	Date		7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		Do	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration late	Title	Amoun or Numbe of Shares	r						
Option (right to	\$25.7	03/15/2013			A		10,000		(3)	0	3/15/2023	Class A Common	10,00	0	\$0	10,00	0	D		

## **Explanation of Responses:**

- 1. Reflects the grant of restricted stock units (RSUs) that will entitle the Reporting Person to receive one share of the Company's Class B common stock for each RSU that vests. The RSUs vest in increments of 1/3 on each of the first, second, and third anniversary of the grant date, which was March 15, 2013.
- 2. Includes unvested restricted stock units.
- 3. Options may be exercised in increments of 1/3 on each anniversary of the grant date beginning on the third anniversary of the grant date. Grant date is ten years prior to the expiration date.

Steven L. Keller, Attorney in Fact for Scott T. Anderson 03/19/2013

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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).

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$ 

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 Number.