FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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* Gattoni James B (Last) (First) (Middle) 13410 SUTTON PARK DRIVE SOUTH | | | | | | 2. Issuer Name and Ticker or Trading Symbol LANDSTAR SYSTEM INC [LSTR] 3. Date of Earliest Transaction (Month/Day/Year) 01/29/2016 | | | | | | | | | Relationshi neck all app X Direct X Offic below | ng Perso | 10% C | Owner (specify | | |
|---|---|--|---|-----------------------------------|---------|---|-----------------------------|-------|--|---|--------|---|--|---|---|---|--|-------------------|---|--|
| (Street) JACKSONVILLE FL 32224 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ne) X Form Form | ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | y/Year) | Execution Date, | | | Transaction Disposed Code (Instr. and 5) | | | rities Acquired (A ed Of (D) (Instr. 3 | | | Secur | icially d | 6. Owner Form: D (D) or Indirect (Instr. 4 | irect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | v | Amount | (A (D |) or | Price | Repoi Trans | Reported Transaction(s) (Instr. 3 and 4) | | , | (| |
| Common | 016 | | A | | 4,506 | | A | \$0 | 7 | 2,016 | D | | | | | | | | | |
| | 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. 3. Transaction Date (Month/Day/Year) Price of Derivative Security 3.1. Transaction Date (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year) | | | Transaction Code (Instr. 8) | | ative rities ired r osed . 3, 4 | 6. Date Expiration (Month/D | n Dat | ee ear) | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | tr. unt ber | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Own Forn Dire or Ir (I) (II | ct (D) direct | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

/s/ James P. Todd, attorney-infact 02/02/2016

** Signature of Reporting Person Date

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

- * 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.