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* TOBIAS STEPHEN C						2. Issuer Name and Ticker or Trading Symbol NORFOLK SOUTHERN CORP [NSC]									tionship of all applicat Director		ng Pei	rson(s) to I	
(Last) THREE COM	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 09/10/2004								X	Officer (g below) Vice		ve title Othe below Chmn. and C.O.O.		specify	
(Street) NORFOLK (City)	VA (State		3510 Zip)		4.	If Am	nendment,	of Original Filed (Month/Day/Year)					6. Indiv Line) X	ridual 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					Execution Date,		3. Transaction Code (Instr. 8)		Dispo	4. Securities Acquired Disposed Of (D) (Instr. and 5)			5. Amount Securities Beneficiall Owned Following	y (D)		vnership n: Direct r ect (I) r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amo	unt	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(msu. 4)	
Common Stock														175,9	97		D		
Common Stock													16,783(1)			I	By 401(k) Plan		
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 Security			Executio any	cecution Date, if Co		action istr. 8)			6. Date Exercisable Expiration Date (Month/Day/Year)			and 7. Title and Amount of Securities Underlying Derivative Security (In 4)		ying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	e es ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		iration e	Title		Amount or Number of Shares		Transacti (Instr. 4)	tion(s)		
Deferred Stock Units	(2)	09/10/2004			A ⁽²⁾		518.6722		(2)		(2)	Com		518.6722	\$28.92 ⁽²⁾	15,461.	9793	D	

Explanation of Responses:

- 1. Represents the approximate number of whole shares of Common Stock estimated on the basis of the unit accounting system used by the Plan Administrator as of September 10, 2004, the last date on which a formal statement was available, to have been credited to the reporting person's account in the Norfolk Southern Corporation Thrift and Investment Plan (TIP), a trusteed 401(k) plan. In accordance with TIP's terms applicable to all participants, acquisitions were made at various times and at various prices.
- 2. Reports the number of deferred stock units credited to the account of the reporting person on the basis of the market value of the Common Stock on the dividend payment date. These deferred units ultimately will be satisfied in cash, not in shares of Common Stock.

Remarks:

D. M. Martin, via P.O.A. for Stephen C.Tobias 09/13/2004

** 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.