FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
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)

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* RHODES WILLIAM C III						2. Issuer Name and Ticker or Trading Symbol AUTOZONE INC [AZO]								(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)) (First) (Middle) SOUTH FRONT STREET				3. Date of Earliest Transaction (Month/Day/Year) 11/25/2013								1	X Officer (give title below)			Other (specify below)			
(Street) MEMPH (City)	MEMPHIS TN 38103				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	ndividual or Joint/Group Filing (Check Applicable e) X 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. Transactio Date (Month/Day/N						Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 at				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Pri	e	Transa	eu ction(s) 3 and 4)			(Instr. 4)	
Common Stock 11/				11/25/2	013)13			A		25,000(1)	A	\$4	65.7 ⁽²⁾ 43,33		32.5419		D		
Common Stock															787		I	As Custodian for Daughter		
Common Stock																787		I	As Custodian for Son	
		Та	able II								osed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any				ransaction of ode (Instr. Derivative			6. Date Expira (Monti	tion D		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		r. 3	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	/ E	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Coo		Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or Numb of Share	er								

Explanation of Responses:

1. On December 25, 2010, AutoZone, Inc. ("AutoZone") granted to the reporting person 25,000 restricted stock units in accordance with the AutoZone, Inc. 2011 Equity Incentive Award Plan (the "Plan"). All or a portion of the restricted stock units were eligible to be earned based on the achievement, during an applicable performance period, of applicable stock price targets or diluted earnings per share targets. 100% of the restricted stock units were earned on November 25, 2013 based on the Company's achievement of the stock price target during the performance period beginning on October 1, 2010 and ending on (and including) October 1, 2015. Therefore, the restricted stock units shall vest in full immediately upon the earliest to occur of the following dates: (i) October 1, 2015, (ii) October 1, 2016 or (iii) the date of the reporting person's termination of employment with AutoZone by reason of a termination by AutoZone without cause or due to the report person's death or disability.

2. The price per share is equal to the closing market price of a share of the issuer's common stock on November 25, 2013.

/s/ William C. Rhodes III 11/25/2013

** Signature of Reporting Person

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.