UNITED STATES SECURITIES AND Washington, D.C. 20549	EXCHANGE COMM	ISSION						
FORM 5 ANNUAL STATEMENT OF CHANGES I	N BENEFICIAL	OWNERSHIP						
[] Check box if no longer su Form 4 or Form 5 obligation								
[] Form 3 Holdings Reported	,							
[] Form 4 Transactions Repor	ted							
 Name and Address of Report Longo, Michael E. 123 South Front Street Memphis, TN 38103 	ing Person(s)							
 Issuer Name and Ticker or AutoZone, Inc. (AZO) 	Frading Symbo	1						
3. IRS or Social Security Num	per of Report	ing Person (Vo	Luntary)					
 Statement for Month/Year August 28, 1999 								
5. If Amendment, Date of Orig	inal (Month/Y	ear)						
 Relationship of Reporting I Director [X] Officer (give title be. Senior Vice President 	[] 10%	Owner		able)				
 7. Individual or Joint/Group [X] [X] Form filed by One Repo [] Form filed by More that Table I Non-Derivative Secu 	rting Person n One Reporti	ng Person	- . or Bene	ficial	lv Ωwned			
1)Title of Security		3.Trans- 4.Se action or D Code		curities Acquired(A) isposed of (D) A		5)Amount of	6) 7)Nature of Indirect D Beneficial	
						action Date		Securities
		(Month/ Day/Year)	Code	Amoun	or	Price	Owned at End of Year	or Ownership I
Common Stock Common Stock		01/17/99 02/19/99	G G	17 29	D D		213	D D
Table II (PART 1) Derivative	Securitites	Acquired, Disp	osed of, o	r Bene	ficially Owr	ned (Columns	1 through 6)	
1)Title of Derivative Security	2)Conversio or Exercise Price of Derivative		4)Trans- action Code		5)Number of Derivative Securities Acquired (A) or Disposed of (D)		6)Date Exercisable and Expiration Date	
	Security		Code		۹	D	Exerc	isable Expiration
Table II (PART 2) Derivative		Acquired, Dispo	osed of, o	r Bene	ficially Owr	ned (Columns	1,3 and 7 thro	ough 11)
1)Title of Derivative Security	3)Trans- 7 action o Date S)Title and Amon f Underlying ecurities	unt	I	Amount or Number of	8)Price of Deri- vative Security	9)Number of Derivative Securities Beneficially Owned at	10) 11)Nature of Indirect D Beneficial or Ownership I
-	ا 	itle			Shares		End of Year	

Explanation of Responses:

SIGNATURE OF REPORTING PERSON /s/ MICHAEL E. LONGO DATE 09/10/99