FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See

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

Instruc	Instruction 10.																				
Name and Address of Reporting Person* GOULD ERIC S.							2. Issuer Name and Ticker or Trading Symbol AUTOZONE INC [AZO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
GOOLD ERIC S.																Directo			10% Ov		
		2 [Date of Earliest Transaction (Month/Day/Year)										Officer below)	(give title		Other (s	specify				
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 10/11/2024									Sr. Vice President					
123 SOUTH FRONT STREET																Si. Vice i resident					
		\vdash										_									
(Street)							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
MEMPHIS TN 38103																Form filed by One Reporting Person					
WENTING IN 36103															I 18	Form filed by More than One Reporting					
																Person					
(City)	(City) (State) (Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac								Deemed		3.		4. Securities Acquired (A)				5. Amou				7. Nature	
D					Day/Ye		Execution Date, if any			Transaction Code (Instr.		Disposed Of (D) (Instr. 3, 4		, 4 and	Securitie Beneficia				of Indirect Beneficial		
	(,		(Month/Day/Yea								Owned F	ollowing (I)		str. 4)	Ownership					
									Ī	Code V		Amount	(A) (or ,	Price	Reported Transact	ction(s)			(Instr. 4)	
										Code	<u> </u>	Amount	(D)		FIICE	(Instr. 3 a	and 4)				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
																	I	_		1	
1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any	Date, 1	Code (Ir		of E Derivative (Exp	ate Exer iration D nth/Day/	ate	Amount of Securities			8. Price of Derivative Security	9. Numbe derivative Securities	s	10. Ownershij Form:	Beneficial		
(Instr. 3)	Instr. 3) Price of (Month/Day/ Derivative Security			n/Day/Year) 8			Securities Acquired						Underlying Derivative Securi		curity	(Instr. 5)	Beneficia Owned	lly	Direct (D) or Indirect	t (Instr. 4)	
							(A) or Disposed						(Instr. 3				Following Reported		(I) (Instr. 4)		
							of (D)										Transaction(s)				
							(Instr. 3, 4 and 5)										(Instr. 4)				
				-			3110 0)		_	Т			Amou		nou=+						
												or									
									Date	9	-	xpiration		Nu of	umber						
					Code	v	(A)	(D)		rcisable		ate	Title		nares						
Non-											Ť			T							
Qualified Stock													Comm								
Option	\$3,129.78	10/11/2024			Α		2,917		10/1	5/2026 ⁽¹	1) 1	0/11/2034	Common Stock	2	,917	\$0.0000	2,917	7	D		
(right to																					
buy)																					

Explanation of Responses:

1. Options granted in accordance with the AutoZone, Inc. 2020 Omnibus Incentive Award Plan, with 50% of award exercisable on the date shown and 25% exercisable on each of the first and second

anniversaries of the date shown.

/s/ Eric Gould

10/15/2024

** 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.