FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, D.C. 20549
------------------------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI	Ρ

OMB APPROVAL										
OMB Number:	3235-0287									
<b> </b>	timated average burden									
1										
hours per response	e: 0.5									

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

Name and Address of Reporting Person*     GEORGE MICHAEL A				<u>AU</u>	2. Issuer Name and Ticker or Trading Symbol AUTOZONE INC [ AZO ]									ationship of Reporting I all applicable) Director		ng Per	rson(s) to Is		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 01/01/2024									Office below	er (give title v)		Other (s below)	specify
(Street)					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indivine)	-/				··
(City) (State) (Zip)														Form filed by More than One Reporting Person					
						Rule 10b5-1(c) Transaction Indication													
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)					Execution [		ate, Tran		4. Securities Acquired Disposed Of (D) (Instr. 5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or (D) Prid				ction(s) 3 and 4)			(Instr. 4)
Common Stock 01/01/20				024			A		110.22	A	\$0.0	0000		332.3		D			
		Tal	ole II								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			Transaction Code (Instr. 8)		rative rities iired r osed ) 1. 3, 4	6. Date Expira (Month	tion Da			nt of ities lying ative ity (Instr.	Der	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares						

**Explanation of Responses:** 

/s/ Michael George

01/02/2024

\*\* Signature of Reporting Person

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).