FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
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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* <u>Griffith James C.</u>						2. Issuer Name and Ticker or Trading Symbol AUTOZONE INC [ AZO ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director						
(Last) (First) (Middle) 123 SOUTH FRONT STREET					3. Date of Earliest Transaction (Month/Day/Year) 12/06/2017															
(Street)  MEMPH	•				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)			Person									ı					
			le I -		_			_		ed, D	isposed (	-		cially						
Date			2. Transacti Date (Month/Day		Execut		ate,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefi		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(111511.4)		
Common	Stock			12/06/20	017				M		1,913	A	\$42	5.11	2,01	5.5107		D		
Common	Stock			12/06/20	)17				M		1,710	A	\$50	7.79	3,72	25.5107		D		
Common	Common Stock		12/06/2017				S		3,623	D	\$698.1675(1)		102	102.5107		D				
		Т	able								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration I (Month/Day		ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		D Se (li	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e O s Fe lly D oi (!)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amo or Num of Shar	ber						
Non- Qualified Stock Option (right to buy) <sup>(2)</sup>	\$507.79	12/06/2017			М			1,710	(	3)	09/24/2024	Commo Stock	1,7	10	\$0.000	570		D		
Non- Qualified Stock Option (right to	\$425.11	12/06/2017			М			1,913	(	4)	10/02/2023	Commo Stock	<sup>n</sup> 1,9	13	\$0.0000	0.0000	)	D		

## Explanation of Responses:

- 1. This price represents the weighted average price per share of common Stock of AutoZone, Inc. (the "Issuer"), par value \$0.01 per share (each a "Share"), of sales that were executed at prices ranging from \$698.00 - \$698.56 per Share. The Reporting Person undertakes to provide, upon request by the Securities and Exchange Commission staff, the Issuer or a security holder of the Issuer, full information regarding the number of Shares sold at each price.
- 2. Granted in accordance with the AutoZone, Inc. 2011 Equity Incentive Award Plan.
- $3.\ Options\ exercisable\ in\ one-fourth\ increments\ on\ September\ 23,\ 2015,\ 2016,\ 2017\ and\ 2018,\ respectively.$
- 4. Options exercisable in one-fourth increments on October 1, 2014, 2015, 2016 and 2017, respectively.

/s/ James C. Griffith 12/06/2017 \*\* 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.