## Edgar Filing: O REILLY AUTOMOTIVE INC - Form 4

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O REILLY Form 4 January 04,	AUTOMOTIVE 2017	INC										
FORM	ΠΔ									APPROVAL		
					RITIES AND EXCHANGE COMMISSI shington, D.C. 20549				OMB Number:	3235-0287		
if no lor	nger								Expires:	January 31, 2005		
subject Section Form 4	to SIAIEN 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OI SECURITIES							Estimated average burden hours per response 0.5			
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940												
(Print or Type	Responses)											
1. Name and Address of Reporting Person *2. IsGroves Jeffrey LynnSymb				er Name <b>an</b>			c	5. Relationship of Reporting Person(s) to Issuer				
			O REI [ORLY	LLY AU []	ГОМОТ	IVE	INC	(Check all applicable)				
(Last)	(First) (	Middle)		of Earliest 7	Fransaction	n		Director		)% Owner		
				10000000000000000000000000000000000000				X Officer (give title Other (specify below) below) SVP OF LEGAL & GENERAL COUNSEL				
				f Amendment, Date Original ed(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
SPRINGFI						ore than One Reporting						
(City)	(State)	(Zip)	Tał	ole I - Non-	Derivativ	e Secu	rities Acq	uired, Disposed o	f, or Benefici	ally Owned		
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution D any (Month/Day)		Date, if Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(Instr. 4)			
Common Stock	12/31/2016			F	15 <u>(1)</u>	D	\$ 278.41	94 <u>(2)</u>	D			
Common Stock								207	I	Indirectly in the Company's 401k plan.		

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

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 control number.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 ar	unt of rlying rities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Groves Jeffrey Lynn 233 S PATTERSON SPRINGFIELD, MO 65802			SVP OF LEGAL & GENERAL COUNSEL				
Signatures							
/s/ Jeffrey							

/s/ Jeffrey 01/04/2017 Groves

<u>\*\*</u>Signature of Reporting Person

Date

## **Explanation of Responses:**

\* 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).

(1) Represents shares withheld to satisfy payroll tax withholding obligations upon the vesting of restricted shares previously awarded under the Company's Performance Incentive Plan.

(2) Total includes 18 shares held under the Company's Employee Stock Purchase Plan and 76 shares held directly by Mr. Groves.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.