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LKQ CORP

Form 4 August 18, 20)15									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5	Filed purs	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							Expires:January 31, 2005Estimated average burden hours per response0.5	
obligation may contin <i>See</i> Instruct 1(b).	nue. Section 17(a	*	e Utility Hol e Investment	U	· ·	•	1935 or Section 0	1		
(Print or Type Ro	esponses)									
1. Name and Address of Reporting Person * 2. Issuer CASINI VICTOR M Symbol LKQ CC CONTRACT				Ticker or	Tradi	ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	liddle) 3. Da	3. Date of Earliest Transaction (Cr					k an applicable)		
C/O LKQ CORPORATION, 500 (Month/D WEST MADISON STREET, SUITE 2800				015 $$				title 10% Owner below) and General Counsel		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CHICAGO, 1							Form filed by M Person	Iore than One Re	porting	
(City)	(State) (Zip)	Table I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Ye	Code ar) (Instr. 8)	4. Securi on(A) or D (Instr. 3, Amount	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	08/17/2015		S <u>(1)</u>	8,000	D	\$ 31.37 (2)	279,766	I	By Trust	
Common Stock							161,274 <u>(3)</u>	D		

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

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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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Number Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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						
	Director	10% Owner	Officer	Other			
ASINI VICTOR M /O LKQ CORPORATION)0 WEST MADISON STREET, SUITE 2800 HICAGO, IL 60661			Senior VP and General Counsel				
ianaturaa							

Signatures

C C 5(С

/s/ Victor M. 08/18/2015 Casini

**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) The sale reported on this Form 4 was affected pursuant to a 10b5-1 plan.
- The price reflects the weighted average sale price of the transactions reported. The price range of such transactions was \$31.215 to (2) \$31.53. The reporting person undertakes to provide upon request by the Commission staff, the issuer, or a security holder of the issuer full information regarding the number of shares sold at each separate price.
- This number of shares reflects a correction in the total amount of securities reported as directly beneficially owned. Previous reports filed (3) by the reporting person (commencing with the filing on March 18, 2015) had over-reported such ownership by 4.921 shares.

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.