Edgar Filing: Goodman Sean D. - Form 4

Goodman Sea	an D.										
Form 4											
February 09,	2018										
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
	▪ UNITE	D STATES		ITIES Al hington, l			NGE (COMMISSION	OMB Number:	3235-0287	
Check this box									Expires:	January 31,	
if no longer STATEMENT OF CHAN				GES IN BENEFICIAL OW				NERSHIP OF		2005	
Section 16	subject to				ITIES				Estimated average burden hours per		
Form 4 or							response	•			
Form 5	They pursually to Section 10(a) of the Securities Exchange Act of 1954,										
obligation may contin		7(a) of the	Public Ut	ility Hold	ing Com	pany	Act o	f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestment (Company	y Act	of 19	40			
1(b).											
(Print or Type R	esponses)										
1 Name and A	dress of Reporti	ng Derson *	2.1	N7 11	T . 1	п 1 [.]		5 Delationship of	f Deporting Der	son(s) to	
Goodman Se				Name and	licker or	l radin	g	5. Relationship of Reporting Person(s) to Issuer			
Goodinan Se	•	Symbol									
				ASBURY AUTOMOTIVE GROUP INC [ABG]				(Check all applicable)			
			-	-							
(Last)	(First)	(Middle)		Earliest Tra	insaction			Director X Officer (give		b Owner er (specify	
2005 DDEM		X7 A X7	(Month/Da	-				below)	below)	er (speerry	
	IERE PARKV	VAY,	02/07/20)18				S	SVP & CFO		
NW, SUITE	300										
				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
	1 4 20007								More than One Re		
DULUTH, C	JA 30097							Person		1 0	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	ear) Executi	on Date, if	on Date, if TransactionAcquired (A) or				Securities	Form: Direct	Indirect	
(Instr. 3)		any	CodeDisposed of (D)/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)					Beneficially	Indirect (I) Owne	Beneficial	
		(Month/					5)	Owned Following		Ownership (Instr. 4)	
								Reported	(1130. 4)	(IIIsu: +)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	00/07/2010				3,504			14.100	D		
Stock	02/07/2018			А	(1)	Α	\$0	14,199	D		
					_						

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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						
r	Director	10% Owner	Officer	Other			
Goodman Sean D. 2905 PREMIERE PARKWAY, NW SUITE 300 DULUTH, GA 30097			SVP & CFO				
Signatures							
/s/George A. Villasana, Attorney In-Fact	0)2/09/2018					
**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 grant of restricted stock award. Vesting will occur in three equal annual installments beginning on the first anniversary of the grant date.

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.