Edgar Filing: LKQ CORP - Form 4

LKQ CORF Form 4	2										
January 16,	2015										
FORM	ЛД								OMB APPROVAL		
	UNITED		SECURITIES AND EXCHANGE COM Washington, D.C. 20549					OMB Number:	3235-0287		
Check t if no lor subject Section Form 4 Form 5	nger to STATEN 16. or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires:January 31Expires:200Estimated averageburden hours perresponse0.4	
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 <u>*</u> CASINI VICTOR M			2. Issuer Name and Ticker or Trading Symbol LKQ CORP [LKQ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Middle)	3. Date of	of Earliest 7	Fransaction			(Check)	
C/O LKQ (WEST MA 2800	(Month/Day/Year) 01/14/2015					Director 10% Owner Officer (give title Other (specify below) Senior VP and General Counsel					
	(Street)	(Street) 4. If Ame Filed(Mon				al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CHICAGO), IL 60661							Form filed by Mo Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	y Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired (A) Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	01/14/2015			F <u>(1)</u>	11,776	D	\$ 26.2175	5 180,431	D		
Common Stock	01/15/2015			S <u>(2)</u>	8,000	D	\$ 25.6329 (<u>3)</u>	9 335,766	Ι	By Trust	

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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	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			
CASINI VICTOR M C/O LKQ CORPORATION 500 WEST MADISON STREET, SUITE 2800 CHICAGO, IL 60661			Senior VP and General Counsel				

Signatures

/s/ Victor M. 01/16/2015 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).
- This transaction represents shares withheld by the issuer to pay the tax withholding amount required upon the vesting of restricted stock (1)units.
- (2) 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 \$25.24 to \$26.47. (3) 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.

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.