#### O REILLY AUTOMOTIVE INC

Form 4

February 18, 2014

# FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

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**OMB APPROVAL** 

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue.

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

1(b).

(Last)

233 S PATTERSON

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person \* Groves Jeffrey Lynn

(First)

(Street)

(Middle)

2. Issuer Name and Ticker or Trading

Symbol

O REILLY AUTOMOTIVE INC [ORLY]

3. Date of Earliest Transaction

(Month/Day/Year) 02/13/2014

4. If Amendment, Date Original

Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

Director 10% Owner \_X\_\_ Officer (give title \_ Other (specify below)

VP of Legal & General Counsel

6. Individual or Joint/Group Filing(Check

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

SPRINGFIELD, MO 65802

(City)	(State)	(Zip) Ta	ble I - Non	-Derivati	ve Sec	urities Acqui	red, Disposed of	, or Beneficia	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transaction Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
Common Stock	02/13/2014		M	6,250	A	\$ 29.02	6,537	D	
Common Stock	02/13/2014		S	6,250	D	\$ 152.4617	287 (1)	D	
Common Stock							1,207 (2)	I	Indirectly as trustee for reporting

person's parents and in the Company's

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401k plan.

(9-02)

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

Persons who respond to the collection of SEC 1474 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)

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. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou Underlying Secur (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Am or Nur of Sha
Nonqualified employee stock options (right to buy)	\$ 29.02	02/13/2014		M		6,250	01/23/2010(3)	01/23/2019	Common Stock	6,2

# **Reporting Owners**

Reporting Owner Name / Address	Relationships
reporting owner rame, radicis	

Director 10% Owner Officer Other

Groves Jeffrey Lynn 233 S PATTERSON SPRINGFIELD, MO 65802

VP of Legal & General Counsel

## **Signatures**

/s/ Jeffrey 02/18/2014 Groves \*\*Signature of Date Reporting Person

# **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).
- Total includes 5 shares held under the Company's Employee Stock Purchase Plan, 154 restricted shares awarded under the Company's Performance Incentive Plan and 128 shares held directly by Mr. Groves.

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- (2) Total includes 1,000 shares held as trustee of a trust for the benefit of the reporting person's parents and 207 shares held in the Company's 401k Plan.
- (3) The options vest in four equal annual installments beginning on this 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.