CASINI VICTOR M

Form 4 March 04, 2019

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

Expires:

January 31, 2005

0.5

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Common

Common

Common

Stock

Stock

Stock

02/28/2019

03/01/2019

(Print or Type Responses)

1. Name and CASINI V	Address of Reporting ICTOR M	Syr	ssuer Name and Ticker or Trading ool O CORP [LKQ]	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)				(Check all applicable)				
			te of Earliest Transaction					
		`	th/Day/Year)	Director 10% Owner				
C/O LKQ	CORPORATION	02, 500	8/2019	_X_ Officer (give title Other (specify				
WEST MA	ADISON STREET	Γ, SUITE		below) below) Senior VP and General Counsel				
2800				Semor vy and General Counsel				
(Street)			Amendment, Date Original	6. Individual or Joint/Group Filing(Check				
		File	(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person				
CHICAGO, IL 60661				Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Γable I - Non-Derivative Securities Acc	quired, Disposed of, or Beneficially Owned				
1.Title of	2. Transaction Date	2A. Deemed	3. 4. Securities Acquired (A	5. Amount of 6. 7. Nature of				
Security	(Month/Day/Year)	Execution Date	if Transaction Disposed of (D)	Securities Ownership Indirect				
(Instr. 3)		any	Code (Instr. 3, 4 and 5)	Beneficially Form: Beneficial				
		(Month/Day/Y	ar) (Instr. 8)	Owned Direct (D) Ownership				
				Following or Indirect (Instr. 4)				
			(A)	Reported (I) Transaction(s) (Instr. 4)				
			or	(Instr. 3 and 4)				
			Code V Amount (D) Price					

1,847

21,666

D

Α

27.6244

\$0

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

 $F^{(1)}$

 $A^{(2)}$

Persons who respond to the collection of **SEC 1474** information contained in this form are not required to respond unless the form

226,947

248,613

132,166

D

D

Ι

1

By Trust

(9-02)

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displays a currently valid OMB control

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

 Title of 	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Da	ate	Amou	int of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/Year)		Underlying	Security	,	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired]
					(A) or]
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
							Expiration Date	Title	Number		
									of		
				Code V	(A) (D)				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

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

Signatures

/s/ Victor M. 03/04/2019 Casini

**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).
- (1) This transaction represents shares withheld by the issuer to pay the tax withholding amount required upon the vesting of restricted stock units.
- (2) The transaction represents an award of restricted stock units.

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.

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