FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol AUTOZONE INC [AZO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
GOLDSMITH HARRY L													Directo	or	10% O	wner		
												_		(give title		specify		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)								below)		below)			
					09/27/2011								Exec. VP, Sec. & Gen Cnsl					
123 SOUTH FRONT STREET																- 1		
			\vdash															
						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable				
(Street)													Line)					
MEMPHIS TN 38103			38103										X Form filed by One Reporting Person					
													Form filed by More than One Reporting					
-													Person					
(City) (State) (Zip)				l														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of	Security (Ins	tr. 3)	ansactio	ction 2A. Deemed 3. 4. Securities Acquired (A							d (A) or	or 5. Amount of 6. Ownership 7. Nature						
Date						ecution	Date	Transaction Disposed			រ Of (D) (Instr. 3, 4 ត		Beneficially (D)		orm: Direct	of Indirect		
(Month/D						f any		Code (Instr. 5)							D) or Indirect	Beneficial Ownership		
					(Month/Day/Yea			ar) 8)				Reported (1)) (Instr. 4)	(Instr. 4)			
								Code	v	Amount	(A) or	Price	Transaction(s)			(
								Code	V	Amount	(D)	File	(Instr. 3	and 4)		- 1		
. =:	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 2. 3. Transaction 3A. Deemed 4. 5. Number 6. Date Exercisable and 7. Title and Amount 8. Price of 9. Number of 10. 11. Nature																	
1. Iftle of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Iransaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year	Trans Code		n of		6. Date Exercisabl Expiration Date (Month/Day/Year)		of Securities		es J Security	Derivative Security	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	of Indirect Beneficial Ownership (Instr. 4)		
									П			Amount	1	l				
					1							or	1	l				
					1			B-4-	_			Number	1	l				
				Code	l۷	(A)	(D)	Date Exercisabl		xpiration ate	Title	of Shares	1	l				
					<u> </u>	(1.1)	(-,	- ZXOI OIOUSI				0.14.00						
Incentive Stock Option (Right to Buy) ⁽¹⁾	\$326	09/27/2011		A		400		(2)	0	9/27/2021	Common Stock	400	\$0.0000	400	D			
Non- Qualified Stock Option (right to	\$326	09/27/2011		A		11,000		(2)	0	9/28/2021	Common Stock	11,000	\$0.0000	11,000	D			

Explanation of Responses:

- $1.\ Granted\ in\ accordance\ with\ the\ AutoZone,\ Inc.\ 2011\ Equity\ Incentive\ Award\ Plan.$
- $2. \ Options \ exercisable \ in \ one-fourth \ increments \ on \ September \ 27, \ 2012, \ 2013, \ 2014 \ and \ 2015, \ respectively.$

/s/ Harry L. Goldsmith 09/28/2011

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.