FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	VAL						
OMB Number: 3235-0287							
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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* RHODES WILLIAM C III				2. Issuer Name and Ticker or Trading Symbol AUTOZONE INC [AZO]									ationship k all app Direc	,		. ,	on(s) to Issuer			
(Last) (First) (Middle) 123 SOUTH FRONT STREET				3. Date of Earliest Transaction (Month/Day/Year) 07/01/2021									X	below	er (give title v) nirman, Preside		Other (below)	` '		
(Street) MEMPH (City)	IS TN		8103 Zip)		4. If <i>F</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	-/					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date			2. Transac Date (Month/Da	Execution Date,						s Acquired (A) or of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) (D)	or P	rice	Transa	ction(s) 3 and 4)				
Common Stock														3,723				GRAT #5		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Conversion Date Execution Date, Ti Security or Exercise (Month/Day/Year) if any C			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	vative irities ired r osed)	6. Date Exerci Expiration Dat (Month/Day/Ye		e Amount of		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)		Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	er						

Explanation of Responses:

Remarks:

Multiple Forms Submitted

/s/ William C. Rhodes III

07/01/2021

** Signature of Reporting Person

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.