HOLSTEN JOSEPH M

Form 4

August 20, 2012

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

3235-0287 Number:

Expires:

January 31, 2005

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Check this box

Form 5 obligations may continue. See Instruction

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).

Common

Common

Stock

Stock

08/17/2012

08/17/2012

(Print or Type Responses)

1. Name and Address of Reporting Person * HOLSTEN JOSEPH M			suer Name and Ticker or Trading ol	5. Relationship of Reporting Person(s) to Issuer			
		LKO	CORP [LKQ]	(Check all applicable)			
(Last)	(First)	(Middle) 3. Da	te of Earliest Transaction				
		(Mor	th/Day/Year)	X Director 10% Owner			
C/O LKQ	CORPORATION	, 500 08/1	7/2012	Officer (give title Other (specify			
WEST MA	ADISON STREET	, SUITE		below) below)			
2800							
	(Street)	4. If	Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
		Filed	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)	Cable I - Non-Derivative Securities A	cquired, 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,	f Transactionr Disposed of (D)	Securities Ownership Indirect			
(Instr. 3)		any	Code (Instr. 3, 4 and 5)	Beneficially Form: Beneficial			
		(Month/Day/Yea	r) (Instr. 8)	Owned Direct (D) Ownership			
				Following or Indirect (Instr. 4)			
			(A)	Reported (I) Transaction(s) (Instr. 4)			
			or Code V Amount (D) Pri	(Instr. 3 and 4)			

39,000

39,000 D

Α

(1)

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

M

S

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

\$ 19.135 193,736

38.5012 154,736

D

D

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo Underlying Sect (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ar or Nu of
Employee Stock Option (right to buy)(01/11/2008 grant)	\$ 19.135	08/17/2012		M	39,000	(2)	01/11/2018	Common Stock	39

Dalasianahin

Reporting Owners

Reporting Owner Name / Address	Kelationships					
	Director	10% Owner	Officer	Other		

HOLSTEN JOSEPH M C/O LKQ CORPORATION 500 WEST MADISON STREET, SUITE 2800 CHICAGO, IL 60661



Signatures

/s/ Victor M. Casini, Attorney-in-fact

08/20/2012

**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).

The price reflects the weighted average sale price of the transactions reported. The price range of such transactions was \$38.50 to

- (1) \$38.5019. 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.
- (2) The transaction represents an award of restricted stock units that vest with respect to 10% of the number of shares subject to the award on each six-month anniversary of the grant 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.

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