## Edgar Filing: Mikan George Lawrence III - Form 4

Mikan George Lawrence III Form 4 January 04, 2019

January 04, 20	019									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								<b>-</b>	OMB APPROVAL	
UNITED STATES SECURITIES AND EACHANGE COMMISSION							OMB Number:	3235-0287		
Washington, D.C. 20549Check this box if no longer subject to Section 16.STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP ( 						ge Act of 1934, f 1935 or Sectio	Expires:January 31, 2005Estimated average burden hours per response0.5			
1(b).	cuon			1.	•					
(Print or Type Ro	esponses)									
Mikan George Lawrence III Symbol			Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (Mi	iddle) 3. Date of	3. Date of Earliest Transaction							
200 SW 1ST AVE, SUITE 1600 (Month/Da 01/02/20			•				X Director 10% Owner Officer (give title Other (specify below) below)			
	ndment, Date Original hth/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
FORT LAUI	DERDALE, FL 33	3301					Person	More than One R	eporting	
(City)	(State) (Z	Zip) Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	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. Transactio Code (Instr. 8) Code V	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) o l of (D 4 and (A) or	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$0.01 per share	01/02/2019		A <u>(1)</u>	6,934	A	\$ 0	35,530	D		

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

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 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)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
Toportung officer ramo, readings	Director	10% Owner	Officer	Othe			
Mikan George Lawrence III 200 SW 1ST AVE SUITE 1600 FORT LAUDERDALE, FL 33301	Х						
Signatures							
/s/ C. Coleman Edmunds, Attorney-in-Fact		01/04/20	)19				
**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).

2019 grant of 6,934 vested restricted stock units (the "RSUs") pursuant to the AutoNation, Inc. 2014 Non-Employee Director Equity Plan (as amended, the "2014 Director Plan"). The RSUs will settle in shares of common stock, par value \$0.01 per share, of AutoNation, Inc.

(1) (the "Company") in accordance with the terms of the award, including any deferral election made by the reporting person, and the 2014 Director Plan. Settlement of the RSUs will be accelerated in certain circumstances as provided in the terms of the award and the 2014 Director Plan, including in the event the reporting person ceases to serve as a non-employee director of the Company.

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.