

LKQ CORP
Form 4
December 13, 2007

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
CASINI VICTOR M

(Last) (First) (Middle)

C/O LKQ CORPORATION, 120
NORTH LASALLE STREET,
SUITE 3300

(Street)

CHICAGO, IL 60602

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
LKQ CORP [LKQX]

3. Date of Earliest Transaction
(Month/Day/Year)
12/11/2007

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
VP and General Counsel

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
____ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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	12/11/2007		M	(A) 20,000 (1)	\$ 2.5 (1) 136,668 (1)	D	
Common Stock	12/11/2007		M	(A) 40,000 (1)	\$ 3.125 (1) 176,668 (1)	D	
Common Stock	12/11/2007		S(2)	(D) 60,000 (1)	\$ 19.9331 116,668 (1)	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

SEC 1474
(9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Underlying Securities (Instr. 3 and 4)
Employee Stock Option (right to buy)(05/31/1998 grant)	\$ 2.5 ⁽¹⁾	12/11/2007		M	20,000 ₍₁₎	10/02/2003 05/31/2008	Common Stock
Employee Stock Option (right to buy)(01/04/1999 grant)	\$ 3.125 ₍₁₎	12/11/2007		M	40,000 ₍₁₎	₍₃₎ 01/04/2009	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships
CASINI VICTOR M C/O LKQ CORPORATION 120 NORTH LASALLE STREET, SUITE 3300 CHICAGO, IL 60602	Director 10% Owner Officer VP and General Counsel Other

Signatures

/s/ Victor M. Casini 12/13/2007
 **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).
- (1) The information regarding share numbers and exercise prices of stock options reflects the two-for-one split of the common stock of LKQ Corporation paid on December 3, 2007.
- (2) The sale disclosed on this Form 4 was effected pursuant to a 10b5-1 plan.
- (3)

Edgar Filing: LKQ CORP - Form 4

The option is exercisable with respect to 10% of the number of shares subject to the option 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.