

Groves Jeffrey Lynn  
Form 3  
June 21, 2010

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
Expires: January 31, 2005  
Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF 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 *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Groves Jeffrey Lynn		(Month/Day/Year)	O REILLY AUTOMOTIVE INC [ORLY]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
233 S PATTERSON			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below) VP of Legal & General Counsel	
SPRINGFIELD,Â MOÂ 65802			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	773 <sup>(1)</sup>	D	Â
Common Stock	172	I	Indirectly in the Company's 401k Plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
--	--	---	------------------------------------	---------------------------------	---

## Edgar Filing: Groves Jeffrey Lynn - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Nonqualified employee stock options (right to buy)	06/21/2005 <sup>(2)</sup>	06/21/2014	Common Stock	9,000	\$ 24.645	D	Â
Nonqualified employee stock options (right to buy)	04/06/2006 <sup>(2)</sup>	04/06/2015	Common Stock	1,250	\$ 24.84	D	Â
Nonqualified employee stock options (right to buy)	07/11/2009 <sup>(2)</sup>	07/11/2018	Common Stock	5,000	\$ 22.65	D	Â
Nonqualified employee stock options (right to buy)	01/23/2010 <sup>(2)</sup>	01/23/2019	Common Stock	25,000	\$ 29.02	D	Â
Nonqualified employee stock options (right to buy)	10/28/2010 <sup>(2)</sup>	10/28/2019	Common Stock	25,000	\$ 33.68	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Groves Jeffrey Lynn 233 S PATTERSON SPRINGFIELD, MO 65802	Â	Â	Â VP of Legal & General Counsel	Â

## Signatures

/s/ Jeffrey Groves  
06/21/2010

\_\_Signature of Reporting Person  
Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) Total includes 90 shares held under the Company's Employee Stock Purchase Plan, 538 restricted shares granted under the Company's Performance Incentive Plan and 145 shares held directly by Mr. Groves.
- (2) The options vest in four equal annual installments beginning on this 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.