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

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| illigton, D.C. 20549 | OMB APPRO |
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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

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

| 1. Name and Address of Reporting Person* Kearney Michael | | | | AS | 2. Issuer Name and Ticker or Trading Symbol ASBURY AUTOMOTIVE GROUP INC ABG] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify | | | | | ner | |
|--|--|--|---------------|-----------------|---|---|-----|----------------------|--------------------------------------|--------|--|---------------|-----------------|---|--|---|---|----------------------------------|--|--|
| (Last) (First) (Middle) C/O ASBURY AUTOMOTIVE GROUP, INC. 2905 PREMIERE PARKWAY NW | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/07/2011 | | | | | | | | | SVP & COO | | | | | | |
| (Street) DULUTI | | | 30097 Zip) | | 4. If Amendment, Date of Original Filed (Month/D 02/08/2011 | | | | | | | ay/Yea | ır) | | 6. Individual or Joint/Group Filing (Check Applicable Line) X 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 | | | | | | | | | | | | | | | | | | | |
| Date | | | | th/Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Disposed Code (Instr. 5) | | ities Acquired (A d Of (D) (Instr. 3, | | | 4 and Secu | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | ect Be Ow | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | | (A) or (D) | Price | 1 | Transaction(s) (Instr. 3 and 4) | | | (111 | 1511. 4) | |
| Common | Common stock, par value \$.01 per share 02/07 | | | | | 1 | | | F ⁽¹⁾ | | 3,372 | 2 D | | \$(| 129,182 | | 29,182 | D | | |
| | 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) | Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any | | | | | Transaction Of Code (Instr. 8) Se Ac (A' Dii | | osed) :. 3, 4 | 6. Date E Expiratio (Month/D | n Dat | Amount of | | str. 3 | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | hip of Be D) Ov ect (In | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | v | (A) | (D) | | | Expiration Date | Title | or Nun of | ount nber res | | | | | | |

Explanation of Responses:

1. Represents the number of shares of the Issuer's common stock withheld for payment of taxes on shares of restricted stock that vested on February 6, 2011.

Remarks:

<u>Darlene Quashie, Attorney-in-</u> <u>Fact</u> <u>03/17/2011</u>

** Signature of Reporting Person Date

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.