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ADAIR A J Form 4	AYSON									
June 09, 20	09									
FORM	14 UNITED ST.	ATES SECU	RITIES /	AND EXC	HAN	IGE CO	MMISSION	-	PROVAL	
				, D.C. 205				OMB Number:	3235-0287	
Check the if no lor subject to Section Form 4 Form 5 obligation	to 16. or Filed pursua	nt to Section	CHANGES IN BENEFICIAL OWNERSHIP C SECURITIES ection 16(a) of the Securities Exchange Act of 1934					Expires:January 31, 2005Estimated average burden hours per response0.5		
obligations may continue. See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940										
(Print or Type	Responses)									
ADAIR A JAYSON Symbol							5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Midd		of Earliest T	_			(Check	all applicable)	
							· · · · · · · · · · · · · · · · · · ·	ve title 10% Owner below) President		
	(Street)		nendment, D onth/Day/Yea	Date Original ar)		1	5. Individual or Joi Applicable Line) X_ Form filed by O	ne Reporting Pe	rson	
FAIRFIEL	D, CA 94534					Ī	Form filed by Mo Person	ore than One Re	porting	
(City)	(State) (Zip) Tal	ble I - Non-	Derivative S	ecurit	ies Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	an	ecution Date, if	Code	oror Disposed (Instr. 3, 4	d of (Ē))	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	06/05/2009		M	361,035	A A	\$ 11.13	361,035	D		
Common Stock	06/05/2009		F <u>(1)</u>	226,336	D	\$ 34.39	414,953	D		
Common Stock							54,468	I	See footnore (2)	
Common Stock							6,174	Ι	See footnore (3)	
							6,174	Ι		

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Common Stock								See footnote (3)	
Reminder: Re	port on a sepa	rate line for each class	s of securities benefic	Persons informat required	who respond t tion contained i I to respond un a currently val	o the collect n this form a less the form	are not n	EC 1474 (9-02)	
			tive Securities Acqui its, calls, warrants, c						
Security or Exercise any		Execution Date, if	4. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Employee Stock Option (right to	\$ 11.13	06/05/2009		М	361,035	(4)	03/15/2010	Common Stock	361,03

Reporting Owners

buy)

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ADAIR A JAYSON C/O COPART, INC. 4665 BUSINESS CENTER DR FAIRFIELD, CA 94534	Х		President			

Signatures

A. Jayson Adair 06/09/2009

<u>**</u>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) Shares withheld by the issuer in payment of the aggregate option exercise price and withholding tax liability incurred upon the reported option exercise.
- (2) Reflects shares held by the A. Jayson Adair and Tammi L. Adair Revocable Trust, of which the reporting person and the reporting person's spouse are trustees.

Reporting Owners

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- (3) Reflects shares held by an irrevocable trust for the benefit of a member of the reporting person's immediate family.
- (4) The option vested 20% after the first year, and thereafter monthly, ratably, over the remaining 48 months vesting term. The option grant date was March 15, 2000, and it became fully exercisable on March 15,2005.

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.