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TRACTOR SUPPLY CO /DE/ Form 5 February 03, 2014 FORM 5

| February 03, 2014 | 4 | | | | | | | | |
|---|-----------------|----------|---|---|---------------|----------------------|--|--|--|
| FORM 5 | | | | | OMB AF | PROVAL | | | |
| Check this box if no longer subject | UNITE | D STATES | OMB Number: Expires: | 3235-0362 January 31, 2005 | | | | | |
| to Section 16. Form 4 or Form 5 obligations may continue. | AN | NNUAL ST | Estimated a burden hour response | verage | | | | | |
| See InstructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or SectionReported30(h) of the Investment Company Act of 1940TransactionsReportedReported | | | | | | | | | |
| 1. Name and Address of Reporting Person <u></u> <u></u> <u>SANDFORT GREGORY A</u> | | | 2. Issuer Name and Ticker or Trading Symbol TRACTOR SUPPLY CO /DE/ [TSCO] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
| (Last) (200 POWELL PI | First) LACE | (Middle) | 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/28/2013 | X Director X Officer (give t below) Pres | | Owner er (specify | | | |
| () | Street) | | 4. If Amendment, Date Original Filed(Month/Day/Year) | 6. Individual or Joi (check | nt/Group Repo | C | | | |
| RDENTWOOD | λ τηλ 37 | 7027 | | | | | | | |

BRENTWOOD, TNÂ 37027

X Form Filed by One Reporting Person Form Filed by More than One Reporting Person

| (City) | (State) (2 | Zip) Table | e I - Non-Deri | vative Sec | uritie | s Acqu | ired, Disposed o | f, or Beneficial | lly 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. Securit Acquired Disposed (Instr. 3, Amount | (A) o of (D |) | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| Common stock | Â | Â | Â | Â | Â | Â | 8,994 | Ι | Stock Purchase Plan |
| Reminder: Report on a separate line for each class of | | | Persons who respond to the collection of information | | | | | rmation | SEC 2270 |

securities beneficially owned directly or indirectly.

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)

(9-02)

| 1. Title of Derivative Security (Instr. 3) | 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) | (Month/Day/Year) vative rities hired or osed b) c. 3, | | Amou Unde Secur | rlying | 8. Price of Derivative Security (Instr. 5) | 9. of D Se B O E I S Fi (I |
|---|---|---|---|---|--|--------------------|-----------------------|--|---|--|
| | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|---------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| SANDFORT GREGORY A 200 POWELL PLACE BRENTWOOD, TN 37027 | ÂX | Â | President-CEO | Â | | | |
| Signatures | | | | | | | |
| Gregory Sandfort by: /s/ Kurt D Attorney-in-fact | 02/03/2014 | | | | | | |

**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).

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Remarks:

This is the second of two Form 5s filed by the reporting person on February 3, 2014.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.