FORM 4

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

OMB APPROVAL
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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * Byrd Heath				2. Issuer Name and Ticker or Trading Symbol SONIC AUTOMOTIVE INC [SAH]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) C/O SONIC AUTOMOTIVE, INC., 4401 COLWICK ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/02/2015						X Officer (give title below) Other (specify below) EVP and CFO				
(Street) CHARLOTTE, NC 28211				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
State)	(Zip)		7	able	I - Non	-Deri	ivative S	Securities	Acquir	red, Dispo	osed of, or I	Beneficially (Owned	
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If Amendment, Date Original Filed(Month/Day/Year) (Zip) Table I - Non-Derivative Securities Acquired, Month/Day/Year) Code (Month/Day/Year) C

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Byrd Heath C/O SONIC AUTOMOTIVE, INC. 4401 COLWICK ROAD CHARLOTTE, NC 28211			EVP and CFO			

Signatures

/s/ Heath R. Byrd	03/04/2015
**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) Represents shares delivered by the reporting person to Sonic Automotive, Inc. to satisfy withholding tax obligations due upon vesting of restricted stock units

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.