FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | Check this box if no longer subject to | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|
| ٦ | Section 16. Form 4 or Form 5 obligations may continue. See | | | | | | | | | |
| J | obligations may continue. See | | | | | | | | | |
| | Instruction 1(b) | | | | | | | | | |

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* <u>Downs Timothy</u> | | | | | | | 2. Issuer Name and Ticker or Trading Symbol FLEETCOR TECHNOLOGIES INC [FLT] | | | | | | | | | nip of Reportin oplicable) ector cer (give title | 10% (| Person(s) to Issuer 10% Owner Other (specify | |
|--|--|------|----------|------------------------------------|-------|---|---|------|---|----------|--------------------|--|-----------------------|-----------------|---|---|---|--|--|
| (Last) (First) (Middle) 5445 TRIANGLE PARKWAY SUITE 400 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/29/2015 | | | | | | | | | ^ bel | ow) (wo | below ging Consulta |)`` | |
| (Street) NORCROSS GA 30092 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. l Lin | e) <mark>X</mark> For For | ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - No | n-Deriva | ative | Sec | uritie | s Ac | quired | , Dis | posed o | f, or I | Bene | eficia | ly Owr | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3) | | | | | 5) Secu Bene | nount of irities eficially ed Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | Code | v | Amount (| | or | Price | Tran | saction(s) r. 3 and 4) | | (11150.4) | | |
| Common Stock ⁽¹⁾ 01/29/2 | | | | | | 2015 | | S | | 540 | 540 D \$ | | \$1 <mark>39</mark> . | 92 | 32,276 | 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) | tive Conversion Date Execution ty or Exercise (Month/Day/Year) if any | | | n Date, Transaction Code (Instr | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 3. Price of Derivative Security (Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | | v | (A) (D) | | | | Expiration Date | Numl of Title Share | | | | | | | |

Explanation of Responses:

1. Pursuant to 10b5-1 sales plan

Remarks:

/s/ Sean Bowen, under power

02/02/2015

Date

of attorney

** Signature of Reporting Person

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.