Edgar Filing: MCKESSON CORP - Form 4

MCKESSO	N CORP									
Form 4										
August 23, 2	2016									
FORM								OMB AF	PROVAL	
	UNITED		URITIES Vashingto				OMMISSION	OMB Number:	3235-0287	
Check this box if no longer							Expires:	January 31,		
subject		AENT OF CH		GES IN BENEFICIAL OWNERSHIP O			NERSHIP OF	Estimated average		
Section		SECURITIES						burden hours per		
Form 4 Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5	
obligatio						-	1935 or Section			
may cor	iunue.	30(h) of the	•	•	-	•				
<i>See</i> Inst 1(b).	ruction	50(ii) of th		in comp			0			
-(-).										
(Print or Type	Responses)									
		- *								
	Address of Reporting		suer Name a	nd Ticker of	or Trad		5. Relationship of Reporting Person(s) to Issuer			
JACOBS M CHRISTINE Symbo MCK							155001			
			KESSON CORP [MCK]			(Check all applicable)				
			Date of Earliest Transaction							
ONE POST	L STDEET					X_ Director Officer (give the second s		Owner r (specify		
ONE POST STREET			08/22/2016				below) below)			
			Amendment, l	nendment, Date Original			6. Individual or Joint/Group Filing(Check			
			(Month/Day/Ye	ear)			Applicable Line)			
							_X_Form filed by One Reporting Person Form filed by More than One Reporting			
SAN FRAI	NCISCO, CA 941	04					Person		8	
(City)	(State)	(Zip)	fable I - Non	-Derivativ	e Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of	2. Transaction Date		3.			equired (A)		6.	7. Nature of	
Security	(Month/Day/Year)	Execution Date,				Securities	Ownership	Indirect Beneficial		
(Instr. 3)		any (Month/Day/Yea		Code (Instr. 3, 4 and 5) (Instr. 8)			Beneficially Owned		Ownership	
		× •	/ 、 /				Following	or Indirect	(Instr. 4)	
					(A)		Reported Transaction(s)	(I) (Instr. 4)		
			~		or		(Instr. 3 and 4)	(11150.4)		
Common			Code V	Amount	(D)	Price \$. ,			
Stock	08/22/2016		S	915	D	\$ 193.783:	5 ⁰	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D)		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(Instr. 3, 4, and 5) (A) (D)		Expiration Date	Title Amoun or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
JACOBS M CHRISTINE ONE POST STREET SAN FRANCISCO, CA 94104	Х						
Signatures							
Donna Spinola, Attorney-in-fact	08/2	23/2016					
**Signature of Reporting Person	1	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).

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.