Edgar Filing: MCKESSON CORP - Form 4

MCKESSO	N CORP									
Form 4										
May 28, 20	14									
FORM	ЛЛ					E COMMISSION		PPROVAL		
	NOMB	3235-0287								
Check th	his box	•••	ashington	, D.C. 20	547			January 31,		
if no lon		MENT OF CHA	NGES IN	BENEF	Expires:	2005				
subject t	.0		SECUE		Estimated	-				
Section Form 4			Sheer			burden hours per				
Form 5		suant to Section	16(a) of th	e Securi	ties Exch	ange Act of 1934,	response	. 0.5		
obligatio	$\frac{1}{2}$ Section 17(et of 1935 or Section	าท			
may con	lunue.	30(h) of the 1 done $30(h)$	•	•	- ·		511			
<i>See</i> Instr 1(b).	ruction	50(ii) of the	investment	Compa		1740				
1(0).										
(Print or Type	Responses)									
× 51	1 /									
1. Name and	Address of Reporting	Person [*] 2 Issi	er Name an d	l Ticker or	Trading	5. Relationship c	of Reporting Per	rson(s) to		
BEER JAN		Symbol				Issuer	1 0			
		-	KESSON CORP [MCK]							
			(Ch			eck all applicable)				
(Last)	(First) (.		Date of Earliest Transaction							
ONE DOST	CTDEET		(onth/Day/Year)			Director X Officer (giv		% Owner her (specify		
ONE POST	SIREEI	05/277	/27/2014 <u></u>				below)			
						EVP & C	Chief Financial (Officer		
	(Street)	4. If An	Amendment, Date Original 6			6. Individual or J	6. Individual or Joint/Group Filing(Check			
		Filed(M	d(Month/Day/Year) Applicable Li							
						X Form filed by				
SAN FRAN	NCISCO, CA 941	04				Person	More than One R	eporting		
(City)	(Stata)	(7:)								
(City)	(State)	(Zip) Ta	ble I - Non-I	Derivative	Securities	Acquired, Disposed of	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if	Transactio	•			Form: Direct	Indirect		
(Instr. 3)		any	Code	Disposed		<i>.</i>	(D) or Indirect			
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4	+ and $5)$		(I) (Instr. 4)	Ownership (Instr. 4)		
						Reported	(instr. i)	(Instr. 1)		
					(A)	Transaction(s)				
			Code V	Amount	or (D) Pric	e (Instr. 3 and 4)				
				mount		-				
Reminder: Re	port on a separate line	e for each class of se	curities benef	ficially ow	ned 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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amoun
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securit
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	d of				
				Code V	7 (A)	` '	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Restricted Stock Units	\$ 0	05/27/2014		А	12,059		(1)	<u>(1)</u>	Common Stock	12,0
Employee Stock Option (Right-to-buy)	\$ 183.37	05/27/2014		А	31,155		(2)	05/27/2021	Common Stock	31,1

Reporting Owners

Reporting Owner Name / Address	s Relationships						
, of the second s	Director	10% Owner	Officer	Other			
BEER JAMES A ONE POST STREET SAN FRANCISCO, CA 94104			EVP & Chief Financial Officer				
Signatures							
Donna Spinola, Attorney-in-fact	05/2	28/2014					

<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) These units will vest 100% on 5/27/2017.

(2) This option granted 5/27/2014 will vest 25% per year, commencing on the 1st anniversary of the grant date.

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.