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| FEDEX CO | RP | | | | | | | | | | |
|--|------------------|-------------|--|-----------------------------|------------|--------|--|---|---|-------------|--|
| Form 4 | | | | | | | | | | | |
| October 05, | 2016 | | | | | | | | | | |
| FORM | 14 | | | | | | | | OMB AF | PROVAL | |
| UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check th | | | | 0 / | | | | | Expires: | January 31 | |
| if no lon subject t | | EMENT O | F CHAN | GES IN | BENEF | ICIA | LOWN | VERSHIP OF | | 2005 | |
| Section 16. Form 4 or | | | | SECURITIES | | | | | Estimated average burden hours per response 0. | | |
| Form 5 | Filed p | ursuant to | Section 1 | 6(a) of th | e Securi | ties E | Exchange | e Act of 1934, | 100001100111 | 0.0 | |
| obligatic may con <i>See</i> Instr 1(b). | tinue. Section 1 | 7(a) of the | Public U | | ding Co | npan | y Act of | 1935 or Section | l | | |
| (Print or Type | Responses) | | | | | | | | | | |
| CARTER ROBERT B Sy | | | Symbol | r Name and | | Tradi | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (I+) | (Einst) | (M: 141-) | | - | - | | | (Check | all applicable |) | |
| (Last) | (First) | (Middle) | | f Earliest Tr | ransaction | | | Director | 10% | Owner | |
| 942 SOUTI ROAD | H SHADY GRO | OVE | 10/04/2 | Day/Year) 016 | | | | Officer (give below) | | er (specify | |
| | (Street) | | | endment, Da nth/Day/Year | - | ıl | | 6. Individual or Joi Applicable Line) _X_ Form filed by O | | | |
| MEMPHIS | , TN 38120 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative | Secur | rities Acqu | iired, Disposed of, | or Beneficiall | ly Owned | |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date any (Month/Day/Year) | | n Date, if | Date, ifTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5) | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common | | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 10/04/2016 | | | М | 871 | А | \$ 114.74 | 44,270 | D | | |
| Common Stock | | | | | | | | 1,245 | Ι | By Wife | |

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

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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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. Number or of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Pr Deri Secu (Inst |
|---|---|---|--|---|--|--------------------|---|--|--------------------------------|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Incentive Stock Option (Right to Buy) | \$ 114.74 | 10/04/2016 | М | 871 | <u>(1)</u> | 07/09/2017 | Common Stock | 871 | ¢, |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|------------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| CARTER ROBERT B 942 SOUTH SHADY GROVE ROAD MEMPHIS, TN 38120 | | | EVP Chief Info Officer | | | | |
| Cianaturaa | | | | | | | |

Signatures

/s/ Robert B. 10/04/2016 Carter **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 options first exercisable one year from date of grant.

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.