Edgar Filing: COLTER GARY F - Form 4

| COLTER GAR Form 4 May 22, 2018 | KY F | | | | | | | | | | |
|--|--|--|---|---|--------------|--|---|---|------------------|-----------|--|
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | OMB APPROVAL | | |
| | UNITED 5 | TATES S | SECURITIES AND EXCHANGE COMMI Washington, D.C. 20549 | | | | | OMMISSION | OMB Number: | 3235-0287 | |
| Check this b if no longer subject to Section 16. Form 4 or | | BENEFI ITIES | [CIA] | Expires: January 3 200 Estimated average burden hours per response 0. | | | | | | | |
| Form 5 obligations may continu <i>See</i> Instruct 1(b). | Bection 17(a) | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | |
| (Print or Type Res | sponses) | | | | | | | | | | |
| COLTER GARY F Sym | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | Core-Mark Holding Company, Inc. [CORE] | | | | | (Check all applicable) | | | |
| (Last) (First) (Middle) 3. Date of (Month/D) 395 OYSTER POINT BLVD., 05/22/20 SUITE 415 05/22/20 | | | | | | | Director 10% Owner Officer (give title Other (specify below) | | | | |
| | (Street) 4. If Amer Filed(Mont | | | | - | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| SOUTH SAN FRANCISCO | , CA 94080 | | | | | | | Form filed by M Person | lore than One Re | porting | |
| (City) | | Zip) | Table | e I - Non-Do | erivative S | Securi | ities Acqu | uired, Disposed of | , or Beneficial | y Owned | |
| | 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or | | | 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) | | | |
| Coremark Common (Stock | 05/22/2018 | | | Code V P | Amount 5,000 | (D) A | Price \$ 18.34 | (Instr. 3 and 4) 37,493 | 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.

Edgar Filing: COLTER GARY F - Form 4

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|-------|--|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|-----------------------------------|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| COLTER GARY F | | | | | | |
| 395 OYSTER POINT BLVD., SUITE 415 | | | | | | |
| SOUTH SAN FRANCISCO, CA 94080 | | | | | | |
| Signatures | | | | | | |

Chris Miller, 05/22/2018 POA

**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).

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.