

# SECURITIES AND EXCHANGE COMMISSION

## FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2013-01-23** | Period of Report: **2013-01-18**  
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### REPORTING OWNER

**MILLER CHRISTOPHER M**

CIK: **1219175**

Type: **4** | Act: **34** | File No.: **000-51515** | Film No.: **13543950**

Mailing Address  
200 FOURTH ST  
OAKLAND CA 94607

### ISSUER

**Core-Mark Holding Company, Inc.**

CIK: **1318084** | IRS No.: **201489747** | State of Incorporation: **DE** | Fiscal Year End: **1231**  
SIC: **5141** Groceries, general line

Mailing Address	Business Address
395 OYSTER POINT BLVD. #415 SOUTH SAN FRANCISCO CA 94080	395 OYSTER POINT BLVD. #415 SOUTH SAN FRANCISCO CA 94080 650-589-9445

# FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### OMB APPROVAL

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person <b>MILLER CHRISTOPHER M</b>			2. Issuer Name and Ticker or Trading Symbol <b>Core-Mark Holding Company, Inc.</b> <b>[CORE]</b>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) <b>VP &amp; Chief Accounting Officer</b>		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <b>01/18/2013</b>			6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person		
395 OYSTER POINT BLVD., SUITE 415			4. If Amendment, Date Original Filed(Month/Day/Year)					
(Street) <b>SOUTH SAN FRANCISCO, CA 94080</b>								
(City)	(State)	(Zip)						

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Coremark Common Stock	01/18/2013		M		1,166	A	\$0.01	1,455	D	
Coremark Common Stock	01/18/2013		S		1,166 <sup>(1)</sup>	D	\$51.46	289	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number 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 Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
RSU 10LTIP GR 2012	\$0.01	01/18/2013		M		1,166		01/18/2013	01/18/2019	Coremark Common Stock	1,166	\$ 0	2,334	D	

#### Explanation of Responses:

- Shares sold pursuant to a Section 10b5-1 plan.

## Signatures

Shawn Levitt, POA

\*\* Signature of Reporting Person

01/23/2012

Date

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.**