FEDEX CORP
Reported by
CARTER ROBERT B

FORM 4
(Statement of Changes in Beneficial Ownership)

Filed 06/05/12 for the Period Ending 06/04/12

Address 942 SOUTH SHADY GROVE ROAD
          MEMPHIS, TN 38120-
Telephone 9018187500
CIK 0001048911
Symbol FDX
SIC Code 4513 - Air Courier Services
Industry Air Courier
Sector Transportation
Fiscal Year 05/31
# 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

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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(f) of the Investment Company Act of 1940

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1. **Name and Address of Reporting Person**
   - CARTER ROBERT B
     - 942 SOUTH SHADY GROVE ROAD
     - MEMPHIS, TN 38120

2. **Issuer Name and Ticker or Trading Symbol**
   - FEDEX CORP [ FDX ]

3. **Date of Earliest Transaction (MM/DD/YYYY)**
   - 6/4/2012

4. **Individual or Joint/Group Filing**
   - X Form filed by One Reporting Person

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

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Amount of Securities Acquired (A) or Disposed of (D)</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>6/4/2012</td>
<td>A</td>
<td>7285 A</td>
<td>$0</td>
</tr>
</tbody>
</table>

6. **Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

<table>
<thead>
<tr>
<th>Title of Derivate Security</th>
<th>Conversion or Exercise Price of Derivative Security</th>
<th>Trans. Date</th>
<th>Trans. Code</th>
<th>Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3 and 4)</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Title of Underlying Security</th>
<th>Amount or Number of Shares</th>
<th>Price of Derivative Security</th>
<th>Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>Date Exercisable</th>
<th>Expiration Date</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-qualified Stock Option (Right to Buy)</td>
<td>$85.255</td>
<td>6/4/2012</td>
<td>A</td>
<td>24235</td>
<td>(t)</td>
<td>6/4/2022</td>
<td>Common Stock</td>
<td>24235</td>
<td>$0</td>
<td>24235 D</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. **Explanation of Responses:**
   - (1) These options first exercisable one year from date of grant.

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**Reporting Owners**

<table>
<thead>
<tr>
<th>Reporting Owner Name / Address</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td>CARTER ROBERT B</td>
<td>Director</td>
</tr>
<tr>
<td>942 SOUTH SHADY GROVE ROAD</td>
<td>10% Owner</td>
</tr>
<tr>
<td>MEMPHIS, TN 38120</td>
<td>Other</td>
</tr>
</tbody>
</table>

**Signatures**

/ls/ Robert B. Carter  
6/4/2012

*Signature of Reporting Person

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**OMB APPROVAL**

OMB Number: 3235-0287
Estimated average burden hours per response... 0.5

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**Common Stock**

- Stock Code: FDX
- Price: $0
- Date: 24235
- Number of Shares: 24235
- Date Exercisable: 6/4/2022
- Expiration Date: 6/4/2022
- Nature of Indirect Beneficial Ownership: D

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**Non-qualified Stock Option**

- Conversion or Exercise Price: $85.255
- Date Exercisable: 6/4/2012
- Expiration Date: 6/4/2022
- Title: Common Stock
- Amount or Number of Shares: 24235
- Price of Derivative Security: $0
- Number of Derivative Securities Beneficially Owned Following Reported Transaction(s): 24235
- Date Exercisable: 6/4/2022
- Expiration Date: 6/4/2022
- Nature of Indirect Beneficial Ownership: D
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).


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 control number.