Edgar Filing: MCDONALDS CORP - Form 4

MCDONALE	OS CORP										
Form 4											
April 03, 200	6										
FORM	4								PPROVAL		
	UNITE	D STATES		ITIES AI hington, 1			COMMISSION	OMB Number:	3235-0287		
	Check this box if no longer						Expires:	January 31, 2005			
subject to	STATE	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF					'NERSHIP OF	Estimated average			
Section 16	.	SECURITIES							burden hours per		
Form 4 or Form 5	Filed p	ursuant to	Section 16	$\delta(a)$ of the	Securiti	es Exchano	ge Act of 1934,	response	0.5		
obligation	^s Section $1'$						of 1935 or Section	m			
may contin See Instruc	nue.			•		Act of 19					
1(b).					1 5						
(Print or Type R	esponses)										
1. Name and Ad	ldress of Reportin	g Person *	2 Issuer	Name and '	Ticker or T	rading	5. Relationship of	f Reporting Per	son(s) to		
MCMILLAN CARY D			2. Issuer Name and Ticker or Trading Symbol				Issuer				
			-	JALDS C	ORP [M	CD]					
(Last)	(First)	(Middle)		Earliest Tra	-	-	(Cheo	ck all applicable	e)		
			(Month/Da		nouction		X Director	109	6 Owner		
30 WESTWO	OOD LANE		03/31/20	•			Officer (give below)	e title Oth below)	er (specify		
	(Street)		4. If Amer	ndment, Dat	e Original		6. Individual or J	oint/Group Fili	ng(Check		
				th/Day/Year)	U		Applicable Line)	1			
							X Form filed by	One Reporting Po More than One Ro			
LINCOLNSI	HIRE, IL 6006	69					Person	viore man one K	cporting		
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	ecurities Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of	2. Transaction D	Date 2A. Dee	emed	3.	4. Securit		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Yea		on Date, if	Transactio			Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month	/Day/Year)	Code (Instr. 8)	Disposed (Instr. 3, 4		Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(((Following	(Instr. 4)	(Instr. 4)		
						(A)	Reported Transaction(s)				
						or	(Instr. 3 and 4)				
Common				Code V	Amount	(D) Price					
Stock							13,000	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		8. Price o Derivativ Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	<u>(1)</u>	03/31/2006	A <u>(2)</u>	640	(3)	(3)	Common Stock	640	<u>(1)</u>

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
MCMILLAN CARY D 30 WESTWOOD LANE LINCOLNSHIRE, IL 60069	Х			
Signatures				
/s/ Carol A. Vix, Attorney-in-fact	0	4/03/2006		
**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) Acquisition of phantom stock pursuant to Directors' Stock Plan. The phantom stock converts to common stock on a one-for-one basis.
- (2) Acquisition of phantom stock pursuant to Directors' Stock Plan in transaction exempt under Rule 16b-3(d)(1). Amount represents deferred compensation or dividends reinvested.
- (3) Exercisable upon retirement.

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.