1

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

### Edgar Filing: MCCALLISTER MICHAEL B - Form 3

#### MCCALLISTER MICHAEL B Form 3 January 31, 2013 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB APPROVAL** FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number:

### **INITIAL STATEMENT OF 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(h) of the Investment Company Act of 1940

Zoetis Inc. [ZTS]

(Print or Type Responses)

Person \*

B			01/31/2013						
(Last)	(First)	(Middle)		4. Relationsh Person(s) to I	5. If Amendment, Date Original Filed(Month/Day/Year)				
C/O PFIZER GIRALDA I		FIVE	(Check all applicable)						
	(Street)			X Directo Officer (give title below	Other		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting		
MADISON,	NJ 079	940					Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Secur (Instr. 4)	ity		2. Amount Beneficially (Instr. 4)	of Securities 7 Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ture of Indirect Beneficial ership . 5)		
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)									

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

of Derivative Security	Expiration Date		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D)	

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

(Month/Day/Year)

Statement

### ( (

1. Name and Address of Reporting

MCCALLISTER MICHAEL

#### N

1. Title of (Instr. 4)

Shares

or Indirect (I) (Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
MCCALLISTER MICHAEL B C/O PFIZER INC., FIVE GIRALDA FARMS MADISON, NJ 07940	ÂX	Â	Â	Â			
Signatures							
/s/ Katherine H. Walden as Attorney-in-Fact	01/31/2013						
**Signature of Reporting Person		Date					
Explanation of Responses:							

## No securities are beneficially owned

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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.