

CVS HEALTH Corp  
Form 4  
April 03, 2015

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2015  
Estimated average burden hours per response... 0.5

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

**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(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
Moriarty Thomas M

(Last) (First) (Middle)  
ONE CVS DRIVE  
(Street)

WOONSOCKET, RI 02895

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
CVS HEALTH Corp [CVS]

3. Date of Earliest Transaction  
(Month/Day/Year)  
04/01/2015

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
EVP & General Counsel

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
\_\_\_\_ Form filed by More than One Reporting Person

**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 Ownership (Instr. 4) |            |   |  |
|---------------------------------|--------------------------------------|--|--------------------------------|---|---|--|--|------------|---|--|
|                                 |                                      |  | Code                           | V   | Amount or (D) Price   |  |  |            |   |  |
| Common Stock (restricted)       | 04/01/2015                           |  | A                              |   | 7,334<br>(1)  | A  | \$ 102.26                                  | 28,891     | D |  |
| Common Stock                    |                                      |  |                                |   |   |  |  | 9,011.0053 | D |  |
| Common Stock (pep)              |                                      |  |                                |   |   |  |  | 6,397.1434 | D |  |
| Stock Unit                      |                                      |  |                                |   |   |  |  | 6,768      | 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.

SEC 1474  
(9-02)

**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 Underlying Securities (Instr. 3 and 4) | Amount or Number of Shares |
|--|--|--------------------------------------|--|--------------------------------|---|--|---|----------------------------|
| Stock Option                               | \$ 102.26  | 04/01/2015                           |  | A                              | 51,361  | 04/01/2016 <sup>(2)</sup> 04/01/2022                     | Common Stock  | 51,361                     |
| Stock Option                               | \$ 54.53   |                                      |  |                                |   | 04/01/2014 <sup>(3)</sup> 04/01/2020                     | Common Stock  | 49,174                     |
| Stock Option                               | \$ 74.29   |                                      |  |                                |   | 04/01/2015 <sup>(4)</sup> 04/01/2021                     | Common Stock  | 62,943                     |
| Stock Option                               | \$ 48.67   |                                      |  |                                |   | 10/01/2015 <sup>(5)</sup> 10/01/2022                     | Common Stock  | 61,640                     |

## Reporting Owners

| Reporting Owner Name / Address                             | Relationships |           |                       |       |
|--|---------------|-----------|-----------------------|-------|
|  | Director      | 10% Owner | Officer               | Other |
| Moriarty Thomas M<br>ONE CVS DRIVE<br>WOONSOCKET, RI 02895 |               |           | EVP & General Counsel |       |

## Signatures

/s/ Thomas M.  
Moriarty

04/03/2015

\*\*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) Consists of Restricted Stock Units awarded pursuant to Issuer's 2010 Incentive Compensation Plan. Restrictions lapse 50% on 4/1/2018 and 50% 4/1/2020.

## Edgar Filing: CVS HEALTH Corp - Form 4

- (2) Option becomes exercisable in four equal annual installments, commencing 4/1/2016.
- (3) Option became exercisable in four equal annual installments, commencing 4/1/2014.
- (4) Option became exercisable in four equal annual installments, commencing 4/1/2015.
- (5) Option becomes exercisable in three equal annual installments, commencing 10/1/2015.

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.