Edgar Filing: Flum Joshua Matthew - Form 4

Flum Joshua I	Matthew												
Form 4 March 01, 201	10												
FORM	Λ	D ST/	ATES	SECURI	TIES	AN	JD EXC	'HAN	IGE C	OMMISSION		PROVAL	
		DOI	1125				D.C. 205				OMB Number:	3235-0287	
Check this if no longe								OT A T			Expires:	January 31, 2005	
subject to STATEMENT OF CHANG Section 16. Form 4 or					SECU	JRI	TIES				Estimated average burden hours per response 0		
Form 5 obligations may contin <i>See</i> Instruct 1(b).	Section 1	7(a) o	of the H		lity Ho	oldi	ng Com	pany	Act of	Act of 1934, 1935 or Section)	I		
(Print or Type Re	esponses)												
Flum Joshua Matthew Symbol				Symbol			Ficker or T	-	>	5. Relationship of Reporting Person(s) to Issuer			
				CVS HE			1 -	S]		(Check all applicable)			
(Last) (First) (Middle) 3. Date of I (Month/Da 704 EXECUTIVE BOULEVARD 02/28/20				-					Director 10% Owner X_ Officer (give title Other (specify below) EVP, Corp Strategy & Bus Dev				
	(Street)			4. If Amene Filed(Month			e Original			6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Per	son	
VALLEY CO	DTTAGE, NY	(1098	9							Person		Jorning	
(City)	(State)	(Zip))	Table	I - Non	1-De	rivative S	ecurit	ies Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)		Date 2A. Deemed (ear) Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
~					Code	V	Amount		Price	(Instr. 3 and 4)			
Common Stock	02/28/2019				F		990 <u>(1)</u>	D	\$ 57.83	14,946	D		
Common Stock	02/28/2019				А		1,268 (2)	А	\$ 57.83	16,214	D		
Common Stock (restricted)	02/28/2019				А		2,297 (<u>3)</u>	А	\$ 57.83	17,768	D		
Common Stock (pep)										2,616.0772	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)

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactio	5. orNumber	6. Date Exerce Expiration D		7. Titl Amou		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security	(wonur Day Teat)	(Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/ e		Under Securi	lying	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
Flum Joshua Matthew 704 EXECUTIVE BOULEVARD VALLEY COTTAGE, NY 10989			EVP, Corp Strategy & Bus Dev	
Signatures				
/s/ Joshua M				

/s/ Joshua M. Flum	03/01/2019			
<u>**</u> 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) Surrender of shares in payment of withholding taxes due upon the vesting of restricted stock awards under the Issuer's 2017 Incentive Compensation Plan and its Long-Term Incentive Plan.
- (2) Consists of stock awarded at market price pursuant to Issuer's 2017 Incentive Compensation Plan and its Long-Term Incentive Plan.
- Consists of Restricted Stock Units awarded pursuant to Issuer's 2017 Incentive Compensation Plan and its Performance-Based Restricted Stock Unit Plan. Restrictions lapse in three equal installments, commencing February 28, 2020.

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.