#### Edgar Filing: Brennan Troyen A - Form 4

Brennan Troy	ven A										
Form 4											
March 02, 20	18										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									PPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box if no longer whist to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP								Expires:	January 31, 2005		
subject to Section 16 Form 4 or	GES IN E SECURI		CIAI	LOWN	ERSHIP OF	Estimated a burden hour response	ated average en hours per				
Form 5 obligations may continue. See Instruction 1(b). 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 R	esponses)										
Brennan Troyen A Symbo			Name <b>and</b> ' EALTH Co			0	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Mid	dle) 3 Date of	3. Date of Earliest Transaction (Check				(Check	k all applicable)			
			onth/Day/Year) 28/2018				Director 10% Owner X Officer (give title Other (specify below) EVP and Chief Medical Officer				
	ndment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)						
Filed(Month/ WOONSOCKET, RI 02895				_X_				X_Form filed by One Reporting Person Form filed by More than One Reporting			
							Person				
(City)	(State) (Zij	<sup>p)</sup> Table	e I - Non-De	erivative S	ecuri	ties Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1. Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(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)	(I) (Instr. 4)		
			Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common Stock	02/28/2018		А	3,986 (1)	А	\$ 67.73	81,054.059	D			
Common Stock	02/28/2018		F	1,208 (2)	D	\$ 67.73	79,846.059	D			
Common Stock (restricted)							33,486	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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# 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 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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
1	Director	10% Owner	Officer	Other			
Brennan Troyen A ONE CVS DRIVE WOONSOCKET, RI 02895			EVP and Chief Medical Officer				

## Signatures

/s/ Troyen Brennan

03/02/2018

<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) Consists of stock awarded at market price pursuant to Issuer's 2017 Incentive Compensation Plan and its Long-Term Incentive Plan.
- (2) Surrender of shares in payment of withholding taxes due upon the vesting of a stock award under the Registrant's 2017 Incentive Compensation Plan and its Long-Term Incentive Plan.

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.