Brennan Troyen A Form 4 April 03, 2019

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

Form 4 or Form 5 obligations may continue. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

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 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Brennan Troyen A			2. Issuer Name and Ticker or Trading Symbol CVS HEALTH Corp [CVS]	5. Relationship of Reporting Person(s) to Issuer		
			CVS HEALTH Corp [CVS]	(Check all applicable)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction			
			(Month/Day/Year)	Director 10% Owner		
ONE CVS DRIVE			04/01/2019	X Officer (give title Other (specification) EVP and Chief Medical Officer		
				Evi and emer Medical Officer		
(Street)			4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting		
			Filed(Month/Day/Year)			
WOONGOOKET DI 02005						

WOONSOCKET, RI 02895

(State)

(Zip)

(City)

(City)	(State) (Z	ip) Table	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. Transaction Code (Instr. 8)	4. Securi or(A) or Di (Instr. 3,	ispose	d of (D)	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)
Common Stock	04/01/2019		Code V	Amount 3,606 (1)	or (D) D	Price \$ 54.19	(Instr. 3 and 4) 84,317.059	D	
Common Stock (restricted)							16,610	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Person

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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. Number of on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisal Expiration Date (Month/Day/Year		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amous Number Shares
Stock Option	\$ 54.19	04/01/2019		A	161,605	04/01/2020(2)	04/01/2029	Common Stock	161,6
Stock Option	\$ 54.53					04/01/2014(3)	04/01/2020	Common Stock	23,6
Stock Option	\$ 74.29					04/01/2015(4)	04/01/2021	Common Stock	54,5
Stock Option	\$ 102.26					04/01/2016(5)	04/01/2022	Common Stock	47,9
Stock Option	\$ 104.82					04/01/2017(6)	04/01/2023	Common Stock	53,7
Stock Option	\$ 78.05					04/03/2018(7)	04/03/2024	Common Stock	75,1
Stock Option	\$ 62.21					04/01/2019(8)	04/01/2025	Common Stock	87,5

Reporting Owners

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

Signatures

/s/ Troyen
Brennan

**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).

Reporting Owners 2

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- (1) Surrender of shares in payment of withholding taxes due upon the vesting of a stock award under an incentive compensation plan.
- (2) Option becomes exercisable in four equal annual installments, commencing 4/1/2020.
- (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 became exercisable in four equal annual installments, commencing 4/1/2016.
- (6) Option became exercisable in four equal annual installments, commencing 4/1/2017.
- (7) Option became exercisable in four equal annual installments, commencing 4/3/2018.
- (8) Option became exercisable in four equal annual installments, commencing 4/1/2019.

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.