Edgar Filing: CARDINAL HEALTH INC - Form 4

CARDINAL HEALTH INC

Form 4 August 17, 2016

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

3235-0287 Number:

Expires:

January 31, 2005

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Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

Common

Common

Shares

Shares

08/15/2016

08/15/2016

1. Name and Address of Reporting Person * Casey Donald M Jr.			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			CARDINAL HEALTH INC [CAH]							
(Last)	(First) (1	Middle)		Earliest Ti	ransaction					
			(Month/Day/Year)					Director		Owner
7000 CARDINAL PLACE			08/15/2016					X Officer (give title Other (specify below)		
								· · · · · · · · · · · · · · · · · · ·	Medical Segme	nt
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
	Filed(Mon	Filed(Month/Day/Year)					Applicable Line)			
DUBLIN, OH 43017							_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-I	Perivative S	ecurit	ies Acq	uired, Disposed o	of, or Beneficial	ly Owned
1.Title of	2. Transaction Date	e 2A. Deei	med	3.	4. Securiti	es Acc	quired	5. Amount of	6. Ownership	7. Nature of
Security	(Month/Day/Year)	Executio	on Date, if	* * * * * * * * * * * * * * * * * * * *				Securities	Form: Direct	Indirect
(Instr. 3)		any		Code	(Instr. 3, 4	and 5)	Beneficially	(D) or	Beneficial
		(Month/I	Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership
								Following Reported	(Instr. 4)	(Instr. 4)
						(A)		Transaction(s)		
				a 1		or	ъ.	(Instr. 3 and 4)		
				Code V	Amount	(D)	Price	,		

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

 $A^{(1)}$

 $F^{(2)}$

11,991

15.361 D

\$0

\$

(3)

83.6

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150,310

134,949

D

D

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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 or 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 83.19	08/15/2016		A	59,655	<u>(4)</u>	08/15/2026	Common Shares	59,655

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Casey Donald M Jr.

7000 CARDINAL PLACE CEO, Medical Segment

DUBLIN, OH 43017

Signatures

/s/ Elaine S. Natsis,

Attorney-in-fact 08/17/2016

**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) Grant of restricted share units ("RSUs") that vest in three equal annual installments beginning on August 15, 2017.
- (2) Represents withholding of shares to satisfy tax withholding obligations of the reporting person in connection with the vesting of 11,926 RSUs and 23,112 performance share units.
- (3) Reflects closing price on prior business day.
- (4) Stock option vests in three equal annual installments beginning on August 15, 2017.

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.

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