LAWS STUART G Form 4 August 17, 2017

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

Washington, D.C. 20549

January 31, Expires: 2005

Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per

obligations may continue. See Instruction

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

response... 0.5

1(b).

Common

Shares

08/15/2017

(Print or Type Responses)

1. Name and Address of Reporting Person * LAWS STUART G			uer Name and Ticker or Trading ol DINAL HEALTH INC [CAH]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
(Last)	(First) (M		e of Earliest Transaction	D'							
CARDINAL HEALTH, INC., 7000 CARDINAL PLACE			n/Day/Year) /2017	Director 10% Owner X Officer (give title Other (specify below) below) SVP & Chief Accounting Officer							
(Street)			mendment, Date Original	6. Individual or Joint/Group Filing(Check							
DUBLIN, C	DH 43017	Filed(M	Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(State) 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, any (Month/Day/Yea	Code (Instr. 3, 4 and 5)	Beneficially (D) or Beneficial Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4) Reported Transaction(s) (Instr. 3 and 4)							
Common Shares	08/15/2017		A(1) 1,254 A \$ 0	5,414 D							

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

 $F^{(2)}$

855

D

(3)

66.76 4.559

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.

D

Edgar Filing: LAWS STUART G - Form 4

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. Transacti Code (Instr. 8)	5. Number on 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)	\$ 66.43	08/15/2017		A	6,149	<u>(4)</u>	08/15/2027	Common Shares	6,149

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LAWS STUART G CARDINAL HEALTH, INC. 7000 CARDINAL PLACE DUBLIN, OH 43017

SVP & Chief Accounting Officer

Signatures

/s/ Elaine S. Natsis, Attorney-in-fact

08/17/2017

**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, 2018.
- (2) Represents withholding of shares to satisfy tax withholding obligations of the reporting person in connection with the vesting of 1,053 RSUs and 1,552 performance share units.
- (3) Reflects closing price on prior business day.
- (4) Stock option vests in three equal annual installments beginning on August 15, 2018.

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.

Reporting Owners 2