Herendeen Paul Form 4 September 17, 2018

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL OMB** 

3235-0287 Number: January 31,

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if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue.

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 \* Herendeen Paul

2. Issuer Name and Ticker or Trading Symbol

Issuer

below)

Bausch Health Companies Inc.

(Check all applicable)

EVP and CFO

5. Relationship of Reporting Person(s) to

(Last)

(City)

(First) (Middle)

(Zip)

3. Date of Earliest Transaction

Director X\_ Officer (give title

10% Owner Other (specify

400 SOMERSET CORPORATE **BOULEVARD** 

(Street)

(State)

(Month/Day/Year)

09/14/2018

[BHC]

6. Individual or Joint/Group Filing(Check

Applicable Line)

4. If Amendment, Date Original Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

BRIDGEWATER, NJ 08807

(City)	(State)	(Zip) Table	e I - Non-D	erivative S	Securi	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. Transactio Code (Instr. 8)	4. Securitin(A) or Dis (Instr. 3, 4)	posed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock, No Par Value	09/14/2018		P	10,000	A	\$ 22.61 (1)	216,866	D	
Common Stock, No Par Value	09/14/2018		A	10,000 (2)	A	\$ 0	226,866	D	

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

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(9-02)

#### Edgar Filing: Herendeen Paul - Form 4

#### number.

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities Acquired			(Instr.	3 and 4)		Own
	Security										Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration	<b></b> .	or		
						Exercisable Date	Title	Number			
					<del></del>				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Herendeen Paul

400 SOMERSET CORPORATE BOULEVARD BRIDGEWATER, NJ 08807

EVP and CFO

# **Signatures**

/s/ Christina M. Ackermann, attorney-in-fact for Paul Herendeen

09/17/2018

\*\*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) The price in Column 4 is a weighted average price. The prices actually paid in this transaction are within the range of \$22.59 to \$22.63 per share.
- Represents matching Restricted Share Units ("MRSUs") granted to the Reporting Person in connection with the open market purchase of Common Shares of the Issuer reported on Table I (the "Purchased Shares"), pursuant to the Issuer's Matching Share Program. One-third of the MRSUs will vest on each of the first, second, and third anniversaries following the date of grant ("MRSU Grant Date"), subject to the Reporting Person's continued service (except in limited circumstances).

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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