## Edgar Filing: LAWS STUART G - Form 4

LAWS STUA	ART G										
Form 4											
December 04	, 2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									PPROVAL		
	UNITED	SIAIES					NGE C	UNINISSION	OMB Number:	3235-0287	
Check thi	s box	Washington, D.C. 20549								January 31,	
if no long		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP							Expires:	2005	
subject to Section 10		SECURITIES					Estimated average burden hours per				
Form 4 or	Form 4 or								response		
Form 5 obligation	• •						•	e Act of 1934,			
may conti				•	•	· ·		1935 or Section	1		
See Instru	iction	30(h)	of the In	vestment	Compan	iy Ac	t of 194	10			
1(b).											
(Print or Type R	(esponses)										
								5. Relationship of Reporting Person(s) to Issuer			
LAWS STUART G Symbol											
			CARDINAL HEALTH INC [CAH]				САПЈ	(Check all applicable)			
(Last)	(First) (	Middle)		f Earliest Tr	ansaction			Director	100/	Owner	
CARDINAL HEALTH, INC., 7000 12/01/2			h/Day/Year) /2017				XOfficer (give title Other (specify				
CARDINAL PLACE				below)			· · · · · · · · · · · · · · · · · · ·	below) hief Accounting Officer			
			4 If Ame	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
				Month/Day/Year)				Applicable Line)			
								_X_Form filed by One Reporting Person Form filed by More than One Reporting			
DUBLIN, O	H 43017							Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of 6. Ownership 7. Nature of			
Security (Instr. 3)	(Month/Day/Year)	h/Day/Year) Execution Date, if any			on(A) or Di (Instr 3			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(Instr. 5)		•	Day/Year)	Code (Instr. 3, 4 and 5) (Instr. 8)				Owned	Indirect (I)		
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
G					mount	(D)	\$				
Common Shares	12/01/2017			F <u>(1)</u>	43	D	59.19	4,406	D		
Shares							(2)				

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form 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)

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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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	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**

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		12/04/2017						
**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) Represents withholding of shares to satisfy tax withholding obligations of the reporting person in connection with restricted share units.
- (2) Reflects closing price on transaction date.

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.