#### CARDINAL HEALTH INC

Form 4

November 05, 2009

### FORM 4

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

OMB Number: 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

**OMB APPROVAL** 

Form 4 or Form 5 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

burden hours per response... 0.5

1(b).

Common

**Shares** 

11/04/2009

(Print or Type Responses)

1. Name and Address of Reporting Person * NOTEBAERT RICHARD C			2. Issuer Name and Ticker or Trading Symbol CARDINAL HEALTH INC [CAH]			5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
			(Month/D	ay/Year)		_X_ Director		Owner	
7000 CARDINAL PLACE			11/04/2009			Officer (give below)	below)	er (specify	
(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year	)	Applicable Line) _X_ Form filed by	One Reporting Pe	rson	
DUBLIN, OH 43017						Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Securities Acq	quired, Disposed o	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Dat	e 2A. Deer	med	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Executio	n Date, if	Transactio	on(A) or Disposed of (D)	Securities	Form: Direct	Indirect	
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Beneficial	
		(Month/l	Day/Year)	(Instr. 8)		Owned	Indirect (I)	Ownership	
						Following	(Instr. 4)	(Instr. 4)	
					(A)	Reported			
					(A)	Transaction(s)			

Code V Amount

4,119

A

(D)

Α

Price \$

29.13

(1)

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.

SEC 1474

(9-02)

(Instr. 3 and 4)

21,084

D

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

#### Edgar Filing: CARDINAL HEALTH INC - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration D (Month/Day/	ate	Underlying Securities		8. Price of Derivative Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock (2)	(3)	11/04/2009	A	654	<u>(3)</u>	<u>(3)</u>	Common	654	\$ 28.6

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
NOTEBAERT RICHARD C 7000 CARDINAL PLACE DUBLIN, OH 43017	X					

# **Signatures**

/s/ James E. Barnett,
Attorney-in-fact

\*\*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) Restricted share units granted under the Cardinal Health, Inc. 2007 Nonemployee Directors Equity Incentive Plan, as amended. These restricted share units were granted without payment by the grantee and will vest on November 4, 2010.
- (2) Phantom stock held under the Cardinal Health Deferred Compensation Plan, as amended and restated effective January 1, 2009 and as further amended.
- (3) Each share of phantom stock is the economic equivalent of one common share. The shares of phantom stock become payable in cash at least six months after termination from board service.
- (4) Price is the closing share price on November 3, 2009.

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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