Cappucci Gabriel R. Form 4 March 06, 2019

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * Cappucci Gabriel R.

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(Last)

(First)

Teladoc Health, Inc. [TDOC]

3. Date of Earliest Transaction

(Check all applicable)

C/O TELADOC HEALTH, INC.., 2

(Street)

(State)

03/04/2019

(Middle)

(Zip)

Director 10% Owner Other (specify X_ Officer (give title below)

Senior VP, Controller and CAO

MANHATTANVILLE ROAD, **SUITE 203**

(City)

4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

PURCHASE, NY 10577

		1 4010	Two Berrative Securities required, Disposed of, or Beneficiary Owned						
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3.	4. Securi		•	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
(Instr. 3)	(Wolldin Day) Tear)	any	Code	n(A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficially	(D) or	Beneficial	
		(Month/Day/Year)	(Instr. 8)	Amount	(A) or (D)	Price	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock	03/04/2019		M M	1,767	A	(<u>1</u>)	1,767	D	
Common Stock	03/04/2019		F	538 (2)	D	\$ 67.55	1,229	D	

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

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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. Transacti Code (Instr. 8)	5. Number of 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
Restricted Stock Units	(1)	03/04/2019		M		1,767	(3)	(3)	Common Stock	1,767
Restricted Stock Units	<u>(5)</u>	03/04/2019		A	4,441		<u>(4)</u>	<u>(4)</u>	Common Stock	4,441

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Cappucci Gabriel R. C/O TELADOC HEALTH, INC., 2 MANHATTANVILLE ROAD, SUITE 203 PURCHASE, NY 10577

Senior VP, Controller and CAO

Signatures

/s/ Adam C. Vandervoort, attorney-in-fact

**Signature of Reporting Person

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).

03/06/2019

Date

- (1) Restricted stock units convert to shares of TDOC common stock on a one-for-one basis.
- (2) Shares sold to cover the issuer's withholding obligation in respect of reporting person's award.
- (3) On March 1, 2018, the reporting person was granted 5,300 restricted stock units, vesting in three equal annual installments beginning on the first anniversary of the grant date.
- (4) The restricted stock unit vests in three equal annual installments beginning March 4, 2020.
- (5) Each restricted stock unit represents a contingent right to receive one share of TDOC common stock.

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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