#### Edgar Filing: Bisaccia Lisa - Form 4

Bisaccia Lisa Form 4 April 03, 2013 <b>FORM</b> Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	<b>4</b> UNITED ST	Was CNT OF CHAN ant to Section 10 of the Public Ut	RITIES AND EXCHAN shington, D.C. 20549 IGES IN BENEFICIAI SECURITIES 6(a) of the Securities Ex tility Holding Company ivestment Company Act	C OWNERSHIP OF change Act of 1934, Act of 1935 or Section	OMB Number: Expires: Estimated a burden hou response	•
(Print or Type Re	esponses)					
1. Name and Ad Bisaccia Lisa	dress of Reporting Per	Symbol	r Name <b>and</b> Ticker or Trading	Issuer S]		
(Last) ONE CVS D	(First) (Mid RIVE	ldle) 3. Date of (Month/D 04/01/20	-	Director X Officer (give below)		Owner er (specify
WOONSOCE	(Street) KET, RI 02895		endment, Date Original nth/Day/Year)	6. Individual or Jo Applicable Line) _X_ Form filed by M Form filed by M	int/Group Filin Dne Reporting Pe	rson
(City)	(State) (Zi	ip) Tabl	le I - Non-Derivative Securit	Person	or Beneficial	lv Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		3.4. Securities AdTransactior(A) or DisposedCode(Instr. 3, 4 and	equired 5. Amount of 1 of (D) Securities	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock (restricted)	04/01/2013		$A \qquad \frac{6,419}{(1)} \qquad A$	\$ 54.53 29,128.0004	D	
Common Stock				8,476	D	
ESOP Common Stock				547.7913	Ι	Direct
Stock Unit				27,088.2579	D	

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)

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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and A Underlying S (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amoun Number Shares
Stock Option	\$ 54.53	04/01/2013		А	27,538	04/01/2014(2)	04/01/2020	Common Stock	27,53
Phantom Stock Credits	\$ 1					<u>(3)</u>	<u>(3)</u>	Common Stock	472.3
Stock Option	\$ 36.23					04/01/2011(4)	04/01/2017	Common Stock	15,29
Stock Option	\$ 34.96					04/01/2012(5)	04/01/2018	Common Stock	36,17
Stock Option	\$ 45.07					04/02/2013(6)	04/02/2019	Common Stock	31,05

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Bisaccia Lisa ONE CVS DRIVE WOONSOCKET, RI 02895			SVP, Chief HR Officer		

## Signatures

Lisa G. Bisaccia

04/03/2013

<u>\*\*</u>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).

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- (1) Consists of Restricted Stock Units awarded pursuant to Issuer's 2010 Incentive Compensation Plan. Restrictions lapse 50% on 4/1/2016 and 50% on 4/1/2018.
- (2) Option becomes exercisable in four equal annual installments, commencing 4/1/2014.
- (3) Reflects year-end company-match share credits under a non-qualified deferred compensation plan; share credits are payable in cash only, as such time as has been elected by the reporting person.
- (4) Option became exercisable in three equal annual installments, commencing 4/1/2011.
- (5) Option became exercisable in four equal annual installments, commencing 4/1/2012.
- (6) Option became exercisable in four equal annual installments, commencing 4/2/2013.

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.