Edgar Filing: KOPLOVITZ KAY - Form 4

Form 4	AY										
January 03, 201	8										
FORM 4		CT A TEC	CECU					N.T.	PPROVAL		
	UNITED	SIAIES		shington			E COMMISSIO	N OMB Number:	3235-028		
Check this bo if no longer			Expires:	January 3 200							
subject to Section 16. Form 4 or	MENT OF		SECU	Estimated burden ho response	Estimated average burden hours per response 0						
Form 5 obligations may continue. See Instruction 1(b). 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 Resp	onses)										
1. Name and Address of Reporting Person <u>*</u> KOPLOVITZ KAY			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
		CA, INC. [CA]				(Check all applicable)					
(Last) (First) (Middle) 520 MADISON AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2017			X_ Director10% Owner Officer (give titleOther (specify below)below)					
	4. If Amendment, Date Original Filed(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 							
NEW YORK, N	NY 10022							More than One R			
(City)	(State)	(Zip)		le I - Non-l	Derivativ	e Securities A	Acquired, Disposed	of, or Beneficia	lly Owned		
	ransaction Date onth/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Dispose (Instr. 3	d (A) or d of (D) , 4 and 5) (A) or	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)		
Reminder: Report o	on a separate line	e for each cla	uss of sect	urities bene	Pers info requ	ons who res mation con ired to resp lays a curre	or indirectly. spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

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. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (A) or		

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Derivative Security			Disposed of (D) (Instr. 3, 4, and 5)							
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Deferred Stock Units (1)	(2)	12/31/2017	А		1,765.324		<u>(1)</u>	<u>(1)</u>	Common Stock, \$0.10 par value	1,765.324

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips					
1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Director	10% Owner	Officer	Other				
KOPLOVITZ KAY 520 MADISON AVENUE NEW YORK, NY 10022	Х							
Signatures								
/s/ Kay Koplovitz by David R. attorney-in-fact		01/03/2018						
**Signature of Reporting Person Date								
Explanation of Responses:								
* If the form is filed by more than o	one reportin	g person, <i>see</i> Ir	struction 4	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) Issued under the 2012 Compensation Plan for Non-Employee Directors, as amended, and to be settled by issuance of shares of Common Stock either in a lump sum or in installments following termination of service as a director.
- (2) Deferred Stock Units are convertible into Common Stock on a one-for-one basis.
- (3) Includes Deferred Stock Units having similar terms issued under the Company's prior compensation plans for non-employee directors.

Remarks:

Exhibit List Exhibit 24 - Power of Attorney

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.