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CVS CORP											
Form 4											
February 20, 2	2007										
FORM	4 UNITED S	гатес сі	FCUDI	TIES AN	ID EVC	TT A N	JCE	COMMERIO		APPROVAL	
Check this	IAIES SI	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							3235-0287		
if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	Filed pursu s. Section 17(a)	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								Expires: January 3 200 Estimated average burden hours per response 0	
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> MERLO LARRY J			2. Issuer Name and Ticker or Trading Symbol CVS CORP [CVS]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Mi			Earliest Tra	-			(Check all applicable)			
ONE CVS DRIVE			(Month/Day/Year) 02/12/2007					Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President			
WOONSOC	(Street)			dment, Date n/Day/Year)	e Original			6. Individual or Applicable Line) _X_ Form filed by Form filed by	One Reporting	g Person	
WOUNSOCI	KET, RI 02895-							Person			
(City)	(State) (Z	Cip)	Table	I - Non-De	rivative S	ecuri	ties Ac	quired, Disposed	of, or Benefic	cially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	Code	4. Securi onAcquired Disposed (Instr. 3,	l (A) d l of (E))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock								121,193 <u>(1)</u>	D		
Common Stock (Restricted)								59,566	D		
Stock Unit	02/12/2007			А	9,436 (2)	А	\$0	49,110	D		
ESOP Preference Stock								1,198 (3)	Ι	By ESOP	
								314,797 <u>(4)</u>	Ι		

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Common Stock

By Trust as Beneficiary

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transactiv	5. Mumber	6. Date Exerce Expiration Date		7. Title an Amount o		8. Price of Derivative	9. Nu Derix
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(wond, Day Teat)	(Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) /ative rities ired r osed) : 3,		Underlying Securities (Instr. 3 and 4)	ng	Security (Instr. 5)	Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nu of	nount Imber ares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
I O	Director	10% Owner	Officer	Other				
MERLO LARRY J ONE CVS DRIVE WOONSOCKET, RI 02895-			Executive Vice President					

Signatures

Larry J Merlo 02/20/2007

**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).
- (3) Reflects stock beneficially owned pursuant to issuer's ESOP Plan.
- (1) Includes shares acquired pursuant to issuer's Employee Stock Purchase Plan.
- (4) Includes dividend reinvestment shares acquired during the course of the year.
- (2)

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Consists of Stock Units awarded at market price pursuant to Issuer's 1997 Incentive Compensation Plan, the receipt of which the reporting person has elected to defer.

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.