CVS CAREMARK CORP

Form 4 May 28, 2008

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to **SECURITIES** Section 16. Form 4 or

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

1(b).

Form 5

obligations

may continue.

See Instruction

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading FERDINANDI V MICHAEL Issuer Symbol CVS CAREMARK CORP [CVS] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner _X__ Officer (give title Other (specify ONE CVS DRIVE 05/23/2008 below) Senior Vice President (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting WOONSOCKET, RI 02895-Person

(City)	(State)	(Zip) Ta	ble I - Non	-Derivative	Secur	ities Acquir	ed, Disposed of, o	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	orDisposed of (D) (Instr. 3, 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)
Common Stock	05/23/2008		Code V M	Amount 20,050	(D)	Price \$ 12.475	24,099 (1)	D	
Common Stock	05/23/2008		M	60,000	A	\$ 22.445	84,099 (1)	D	
Common Stock	05/23/2008		M	43,030	A	\$ 30.035	127,129 (1)	D	
Common Stock	05/23/2008		M	16,000	A	\$ 30.2625	143,129 (1)	D	
Common Stock	05/23/2008		S	139,080	D	\$ 42.3532	4,049 (1)	D	

21,560.5196 I Common By Trust as (2) Stock Beneficiary

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

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(9-02)

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. Transactic Code (Instr. 8)			6. Date Exer Expiration D (Month/Day)	ate	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
Stock Option	\$ 12.475	05/23/2008		M		20,050	(3)	03/05/2013	Common Stock	20,050
Stock Option	\$ 22.445	05/23/2008		M		60,000	<u>(4)</u>	01/05/2012	Common Stock	60,000
Stock Option	\$ 30.035	05/23/2008		M		43,030	<u>(5)</u>	04/03/2013	Common Stock	43,030
Stock Option	\$ 30.2625	05/23/2008		M		16,000	<u>(6)</u>	03/07/2011	Common Stock	16,000

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

FERDINANDI V MICHAEL ONE CVS DRIVE WOONSOCKET, RI 02895-

Senior Vice President

Signatures

V.

MichaelFerdinandi 05/27/2008 **Signature of Reporting Date Person

2 Reporting Owners

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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).
- (4) Option became exercisable in three annual installments, commencing 01/05/2006.
- (6) Option became exercisable in three equal installments, commencing 03/07/2003.
- (5) Option became exercisable in three annual installments, commencing 04/03/2007.
- (3) Option became exercisable in three annual installments, commencing 03/05/06.
- (1) Includes shares acquired pursuant to issuer's Employee Stock Purchase Plan.
- (2) Includes dividend reinvestment shares acquired during the course of the year.

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.