## Edgar Filing: Bromark Raymond J - Form 4

Bromark R Form 4 April 02, 20									
FORM	ЛЛ	STATES		RITIES A			E COMMISSION		PPROVAL 3235-0287
Check t if no lo subject Section Form 4 Form 5 obligati may co	rsuant to S	F CHANGES IN BENEFICIAL OWNERSI SECURITIES Section 16(a) of the Securities Exchange Act o Public Utility Holding Company Act of 1935 of					Expires: Estimated burden hou response	urs per	
<i>See</i> Inst 1(b).		30(h)	of the I	nvestmen	t Compai	ny Act of 1	1940		
(Print or Type	e Responses)								
1. Name and Address of Reporting Person <u>*</u> Bromark Raymond J			2. Issuer Name <b>and</b> Ticker or Trading Symbol CA, INC. [CA]			5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle) 520 MADISON AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 03/31/2018			(Check all applicable) <u>X</u> Director <u>10%</u> Owner <u>Officer (give title</u> <u>Other (specify</u> <u>below)</u>			
NEW YOF		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 Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tał	ole I - Non-	Derivative	Securities A	Acquired, Disposed	of. or Beneficia	llv Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4)	ies (A) or 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
Reminder: Re	eport on a separate line	e for each cl:	ass of sec	urities bene	Perso inform requir	ns who re nation con red to resp ays a curre	or indirectly. spond to the colle tained in this form 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		

	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)	03/31/2018	А		1,751.474		(1)	<u>(1)</u>	Common Stock, \$0.10 par value	1,751.474

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>									
L B	Director	10% Owner	Officer	Other					
Bromark Raymond J 520 MADISON AVENUE NEW YORK, NY 10022	Х								
Signatures									
/s/ Raymond J. Bromark by David R. Goldman as									
attorney-in-fact		04/02/2018							
<u>**</u> Signature of Ro		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).
- (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.