QUEST DIAGNOSTICS INC

Form 4 April 24, 2017

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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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 See Instruction

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

c responses)											
1. Name and Address of Reporting Person * PREVOZNIK MICHAEL E			2. Issuer Name and Ticker or Trading Symbol QUEST DIAGNOSTICS INC [DGX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Month/				nth/Day/Year)				Director 10% Owner _X Officer (give title Other (specify below) SVP & General Counsel			
(Street) N, NJ 07940		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					
(State)	(Zip)	Ta	ble I - Non	-Derivativo	e Secu	rities Ac	quired, Disposed	l of, or Benef	icially Owned		
2. Transaction Date (Month/Day/Year)	Execution any	Date, if	Code (Instr. 8)	on(A) or Dis (Instr. 3, 4	sposed 4 and 5 (A) or	of (D)	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)		
04/20/2017			M(1)	1,013	A	\$ 55.65	41,335	D			
04/20/2017			S(1)	1,013	D	\$ 100	40,322	D			
04/20/2017			M <u>(1)</u>	28,500	A	\$ 56.82	68,822	D			
	(First) ST DIAGNOSTIO DRATED, 3 GIRA (Street) N, NJ 07940 (State) 2. Transaction Date (Month/Day/Year) 04/20/2017	(First) (Middle) ST DIAGNOSTICS DRATED, 3 GIRALDA (Street) N, NJ 07940 (State) (Zip) 2. Transaction Date (Month/Day/Year) Execution any (Month/Day) 04/20/2017	Address of Reporting Person 2. Issue Symbol QUES [DGX] (First) (Middle) 3. Date (Month.) ST DIAGNOSTICS DRATED, 3 GIRALDA (Street) 4. If An Filed(M.) N, NJ 07940 (State) (Zip) Ta 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 4. If An Filed(M.) (State) (Zip) Ta (Month/Day/Year) 4. If An Filed(M.) (State) (Zip) Ta (Month/Day/Year)	2. Issuer Name and Symbol QUEST DIAGN [DGX] (First) (Middle) 3. Date of Earliest (Month/Day/Year) ST DIAGNOSTICS DRATED, 3 GIRALDA (Street) 4. If Amendment, I Filed(Month/Day/Year) (State) (Zip) Table I - None 2. Transaction Date 2A. Deemed 3. (Month/Day/Year) Execution Date, if Transaction any Code (Month/Day/Year) (Instr. 8) Code V 04/20/2017 M(1) O4/20/2017 S(1)	2. Issuer Name and Ticker of Symbol QUEST DIAGNOSTICS [DGX] (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) ST DIAGNOSTICS DRATED, 3 GIRALDA (Street) 4. If Amendment, Date Origin Filed(Month/Day/Year) N, NJ 07940 (State) (Zip) Table I - Non-Derivative 2. Transaction Date (Month/Day/Year) Table I - Non-Derivative 2. Transaction Date in Transaction (A) or Distance in Date in Transaction (A) or Distance in Date in Date in Transaction (A) or Distance in Date i	2. Issuer Name and Ticker or Trad Symbol QUEST DIAGNOSTICS INC [DGX] (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) ST DIAGNOSTICS DRATED, 3 GIRALDA (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) N, NJ 07940 (State) (Zip) Table I - Non-Derivative Secution Date, if Transaction(A) or Disposed any Code (Instr. 3, 4 and 5 (Month/Day/Year) (Instr. 8) (A) or Code V Amount (D) 04/20/2017 S(I) 1,013 A 04/20/2017 S(I) 1,013 D	2. Issuer Name and Ticker or Trading Symbol QUEST DIAGNOSTICS INC [DGX] (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) ST DIAGNOSTICS 04/20/2017 4. If Amendment, Date Original Filed(Month/Day/Year) N, NJ 07940 (State) (Zip) Table I - Non-Derivative Securities Accurate (Month/Day/Year) 2. Transaction Date (Annual Code (Instr. 3, 4 and 5) (Instr. 8) Code V Amount (D) Price M(1) 1,013 A \$ 55.65	Address of Reporting Person 2 Symbol Symbol QUEST DIAGNOSTICS INC [DGX] (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) O4/20/2017 ST DIAGNOSTICS O4/20/2017 (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) Applicable Line, X. Form filed berson (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Instr. 8) Table I - Non-Derivative Securities Acquired Securities Acquired Transaction(A) or Disposed of (D) Securities any (Month/Day/Year) (Instr. 8) O4/20/2017 M(1) 1,013 A \$ 55.65 O4/20/2017 S(1) 1,013 D \$ 100 40,322	Address of Reporting Person * Symbol QUEST DIAGNOSTICS INC [DGX] (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) ST DIAGNOSTICS 04/20/2017 (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) (State) 2. Transaction Date (Month/Day/Year) (State) 2. Transaction Date (Month/Day/Year) (State) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. 4. Securities Acquired, Disposed of, or Benef (Month/Day/Year) (Month/Day/Year) 6. Individual or Joint/Group Applicable Line) ———————————————————————————————————		

 $4,792 \frac{(3)}{}$

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401(k)/SDCP

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Common Stock

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

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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 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. 5. Number of TransactionDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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 Options (Right to Buy)	\$ 55.65	04/20/2017		M <u>(1)</u>	1,013	<u>(4)</u>	02/10/2020	Common Stock	1,013
Stock Options (Right to Buy)	\$ 56.82	04/20/2017		M <u>(1)</u>	28,500	<u>(5)</u>	02/15/2021	Common Stock	28,500

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
PREVOZNIK MICHAEL E C/O QUEST DIAGNOSTICS INCORPORATED 3 GIRALDA FARMS MADISON, NJ 07940			SVP & General Counsel			
Signatures						
/s/ William J. O'Shaughnessy, Jr., Attorney in Fact fo Prevoznik	04/24/2017					
**Signature of Reporting Person			Date			

Reporting Owners 2

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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).
- This exercise and sale reported were effected pursuant to a Rule 10b5-1 sales plan adopted by the reporting person on February 10, 2017.
- (2) The amount includes exempt purchases made under the Company's stock purchase plan since the date of the last filing on Form 4.
 - These underlying shares were acquired on a periodic basis by the trustee of the Company's tax qualified Profit Sharing (401(k))
- and/or Supplemental Deferred Compensation Plan. The information was obtained from the plan administrator as of a current date.

 The number of shares is based on the account balance of the Company stock fund under each Plan (which includes some money market instruments) divided by the market price of the Company's stock as of that date.
- The options vested in three equal annual installments beginning with the first on February 10, 2011, the second on February 10, 2012 and the final on February 10, 2013.
- The options vested in three equal annual installments beginning with the first on February 15, 2012, the second on February 15, 2013 and the final on February 15, 2014.

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.