Edgar Filing: QUEST DIAGNOSTICS INC - Form 4

QUEST DIAGNOSTICS INC Form 4 February 23, 2017	2								
FORM 4 UNITED Check this box if no longer subject to Section 16. Form 4 or Form 5 Filed pur	W IENT OF CHA	SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934,						OMB APPROVAL OMB 3235-0287 Number: January 31 Expires: January 31 2005 Estimated average burden hours per response 0.5	
See Instruction 1(b).	a) of the Public 30(h) of the	•	•	-	•		ction		
(Print or Type Responses)									
1. Name and Address of Reporting Doherty Catherine T.	Symbo QUES	2. Issuer Name and Ticker or Trading Symbol QUEST DIAGNOSTICS INC [DGX]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (I C/O QUEST DIAGNOSTIC INCORPORATED, 3 GIRA) FARMS	(Month S 02/21	3. Date of Earliest Transaction (Month/Day/Year) 02/21/2017				Director 10% Owner X Officer (give title Other (specify below) below) SVP, Group Exec. Clin. Fran.			
(Street) MADISON, NJ 07940	nendment, Date Original Ionth/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				
(City) (State)	(Zip) Te	bla I Non	Dorivotiv	Soon	ritias A	Person	dof	or Bonof	icially Owned
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)	11	3. Transacti Code	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Owner Form Direct or Ine (I)	Ownership orm: Direct (D) r Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock (1) 02/21/2017 Common Stock		Code V A	Amount 3,132	or (D) A	Price \$ 0	(Instr. 3 and 4) 76,512 3,767 (2)	D I		401(k)/SDCP

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

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 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)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Non-Qualifed Stock Option (right to buy)	\$ 95.795	02/21/2017		А	37,565	(3)	02/21/2027	Common Stock	37,5

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Doherty Catherine T. C/O QUEST DIAGNOSTICS INCORPORATED 3 GIRALDA FARMS MADISON, NJ 07940			SVP, Group Exec. Clin. Fran.				
Signatures							
Elena H. Radine, Attorney in Fact for Catherine T.		02/23/2	2017				

Doherty
<u>**</u>Signature of Reporting Person

Explanation of Responses:

*		If the form is filed by more than one reporting person, <i>see</i> 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)		Represents an award of restricted share units.
(2)		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.
(3)		The options vest in three equal annual installments beginning on the first annual anniversary of the grant date.
NT /	D'1 (1	

Date

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.