Edgar Filing: QUEST DIAGNOSTICS INC - Form 4

QUEST DI Form 4 February 18	AGNOSTICS IN	С										
FORN Check t if no los subject Section Form 4 Form 5	S SECURITIES AND EXCHANGE COMMISS Washington, D.C. 20549 F CHANGES IN BENEFICIAL OWNERSHIP SECURITIES						F Es bu res	VB umber: cpires: stimated	APPROVAL 3235-028 January 3 200 d average burs per 0	1,		
obligati may co <i>See</i> Inst 1(b).	ons ntinue. Section 17	(a) of the	Public U		lding C	ompa	ny Act o	ge Act of 1934 of 1935 or Sect 940				
(Print or Type	Responses)											
1. Name and Address of Reporting Person <u>*</u> Doherty Catherine T.			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) (Middle) C/O QUEST DIAGNOSTICS INCORPORATED, 3 GIRALDA FARMS			3. Date of Earliest Transaction (Month/Day/Year) 02/16/2016				Director 10% Owner Officer (give title Other (specify below) SVP, Clin. Franchise Solutions					
			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)	Tal	ble I - Non	Derivati	ve Sec	urities Ac	cquired, Disposed	l of, or l	Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactic Code (Instr. 8)	4. Secur	ities A ispose 4 and (A)	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Owners Form: Direct or or India (I) (Instr. 4	7 ship I I (D) C rect (7. Nature of ndirect Beneficial Dwnership Instr. 4)	
Common Stock Common Stock	02/16/2016			Code V F	Amount 609 <u>(1)</u>		Price \$ 61.95	(Instr. 3 and 4) 78,072 (2) (3) 3,730 (4)			401(k)/SDCF	0

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Edgar Filing: QUEST DIAGNOSTICS INC - Form 4

 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu: Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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, Clin. Franchise Solutions					
Signatures								
/s/ William J. O'Shaughnessy, Jr., Attorney in Fact	for Cathe	erine T.	02/18/2016					

Date

<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)	Disposition of common stock to the issuer solely to cover tax withholding obligations arising from the vesting of a previous grant of restricted shares.
(2)	The amount includes exempt purchases made under the Company's stock purchase plan since the date of the last filing on Form 4.
(3)	The amount includes shares acquired via dividend reinvestment since the date of the last filing on Form 4 pursuant to a dividend reinvestment plan, sponsored by a broker-dealer, that essentially mirrors a dividend reinvestment plan sponsored by the registrant.
(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 the Plan (which includes some money market instruments) divided by the market price of the Company's stock as of that 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.

Doherty