Edgar Filing: QUEST DIAGNOSTICS INC - Form 4

Form 4	GNOSTICS II	NC									
February 12, 2010 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Form 5 Section 17(a) of the Public Ur Solution Section 17(a) of the International Section 1 Section 17(a) Section 1 Section 17(a) Section 1 Section 1 Sect				Shington, GES IN SECUR 6(a) of th tility Hold	D.C. 20 BENEF STTIES e Securit ding Cor	ICIA ties E	LOV Exchar y Act	VNERSHIP O age Act of 1934 of 1935 or Sect	N OMB Numbo Expire Estima burder respor	January 31 s: 200 ated average a hours per	0287
1(b).						•					
PREVOZNIK MICHAEL E Symbol				EST DIAGNOSTICS INC				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Me				3. Date of Earliest Transaction (Month/Day/Year) 02/10/2010				Director 10% Owner X Officer (give title Other (specify below) below) SVP & General Counsel			
			endment, Date Original onth/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)	Tabl	e I - Non-D	Derivative	Secur	ities A	cquired, Disposed	l of, or Bene	ficially Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	ned n Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	l (A) o l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direc (D) or Indirect (I) (Instr. 4)	7. Nature of IndirectBeneficialOwnership (Instr. 4)	
Common Stock (1)	02/10/2010			Code V A	Amount 9,678	(D) A	Price \$ 0	(Instr. 3 and 4) 53,867 (2)	D		
Common Stock								4,301 <u>(3)</u>	I	401k/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. 5. Number of TransactiorDerivative 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	02/10/2010		А	30,000	(4)	02/10/2020	Common Stock	30,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	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 for Prevoznik	r Michael E.		02/12/2010				

**Signature of Reporting Person

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) Represents an award of restricted share units granted on February 10, 2010.

(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 stock as of that date.

Date

(4) The option vests in three equal annual installments beginning on the first annual anniversary of the grant 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.

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