### Edgar Filing: LABORATORY CORP OF AMERICA HOLDINGS - Form 4

#### LABORATORY CORP OF AMERICA HOLDINGS

Form 4 June 07, 2005

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

Form filed by More than One Reporting

3235-0287

0.5

January 31, Expires: 2005

**OMB APPROVAL** 

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subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

if no longer

Check this box

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

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Miller Benjamin R Issuer Symbol LABORATORY CORP OF (Check all applicable) AMERICA HOLDINGS [LH] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_ Officer (give title Other (specify (Month/Day/Year) below) 231 MAPLE AVENUE 06/03/2005 EVP, Oncology Products & Serv (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person

#### **BURLINGTON, NC 27215**

(State)

(Zip)

(City)

(eng)	(State)	Table	e I - Non-De	erivative Securities Ac	quired, Disposed (	Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership					
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of				
Security	(Month/Day/Year)	Execution Date, if	Transactio	on(A) or Disposed of	Securities	Form: Direct	Indirect				
(Instr. 3)		any	Code	(D)	Beneficially	(D) or	Beneficial				
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership				
					Following	(Instr. 4)	(Instr. 4)				
				/ <b>A</b> \	Reported						
				(A)	Transaction(s)						
			C = V	or or	(Instr. 3 and 4)						
_			Code V	Amount (D) Price							
Common	06/03/2005		A	1,000 A \$	3,730.8678	D					
Stock	00/03/2003		Л	1,000 A 48.8	(1)	D					

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Person

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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 op f Derivative Securities Acquired (A) or Disposed of (D)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo Underlying Secu (Instr. 3 and 4)	
				Code V	(Instr. 3, 4, and 5)  (A) (D)	Date Exercisable	Expiration Date	Title	An or Nu of Sh
Non-qualified Stock Options (2)	\$ 48.8	06/03/2005		A	5,000	06/03/2006(3)	06/03/2015	Common Stock	5

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Miller Benjamin R 231 MAPLE AVENUE BURLINGTON, NC 27215

EVP, Oncology Products & Serv

## **Signatures**

By: /s/ BRADFORD T. SMITH, Attorney-in-Fact for Benjamin Miller

06/07/2005

\*\*Signature of Reporting Person

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) Amount shown reflects a 2-for-1 stock split effective on May 10, 2002.
- (2) Employee stock option (right to buy) granted pursuant to the Laboratory Corporation of America Holdings 2000 Stock Incentive Plan.
- (3) The option vests in three equal annual installments beginning on the date reflected in this column.

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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