| SEC | Form | 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

Estimated average burden

hours per response:

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| Check this box if no longer subject to | S |
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | | or Sec | tion 30(h) of the In | vestmer | it Con | pany Act of 19 | 940 | | | | | |
|--|------------------------|------------------------|---------------------------------|--|---|--------------------------------------|--------|--|------------------------|-----|---|---|---|--|
| 1. Name and Address of Reporting Person [*] KING DAVID P | | | | 2. Issuer Name and Ticker or Trading Symbol <u>LABORATORY CORP OF AMERICA</u> <u>HOLDINGS</u> [LH] | | | | | | | ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner | | | |
| (Last) 531 SOUTH SPH | (First) RING STREET | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/07/2017 | | | | | | X | X Officer (give title Other (specify below) President & CEO | | | |
| (Street) BURLINGTON | | 27215 | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | 6. Indiv Line) X | | | | | |
| (City) | | (Zip) Fable I - Nor | | | ecurities Acq | | Disp | | | - | | | | |
| 1. Title of Security (| instr. 3) | | 2. Transac Date (Month/Da | | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) Code | | 4. Securities A Disposed Of (5) Amount | | | 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) | |
| | | | , | - | | | | | | · · | | • | <u>.</u> | |

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

| | (e.g., puis, cans, 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. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Restricted Stock Unit | (1) | 02/07/2017 | | Α | | 12,660 | | (2) | (2) | Common Stock | 12,660 | \$ <mark>0</mark> | 55,788 ⁽³⁾ | D | |
| Non- qualified Stock Options ⁽⁴⁾ | \$130.6 | 02/07/2017 | | A | | 48,300 | | 02/07/2018 ⁽⁵⁾ | 02/06/2027 | Common Stock | 48,300 | \$0 | 48,300 | D | |

Explanation of Responses:

1. Each Restricted Stock Unit represents the contingent right to receive one share of Laboratory Corporation of America Holdings Common Stock.

2. The Restricted Stock Units vest in three equal annual installments beginning on 2/7/2018.

3. This number reflects the aggregate number of Restricted Stock Units held by the reporting person.

4. Employee stock option (right to buy) granted pursuant to the Laboratory Corporation of America Holdings 2016 Omnibus Incentive Plan.

5. The option vests in three equal installments beginning on the date reflected in this column.

/s/ F. Samuel Eberts III, Attorney-in-Fact for David P. **King**

02/09/2017

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

** Signature of Reporting Person Date



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