FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL							
OMB Number:	3235-0287							
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	Check this box if no longer subject to							
٦.	Section 16. Form 4 or Form 5							
)	obligations may continue. See							
	Instruction 1(b).							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  EBERTS F SAMUEL III						2. Issuer Name and Ticker or Trading Symbol LABORATORY CORP OF AMERICA HOLDINGS [ LH ]										all appl Direct	icable)	g Per	Person(s) to Issuer  10% Owner  Other (specify		
(Last) (First) (Middle) 531 SOUTH SPRING STREET						Date of 11/20		est Tran	nsaction (M	lonth	/Day/Year)		X	X Officer (give the below) below)  Chief Legal Officer, Secretary							
(Street) BURLINGTON NC 27215  (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)										vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Tab	le I - No	n-Deri	vative	Sec	curiti	es Ac	cquired,	Dis	posed	of, oı	r Ber	nefici	ally	Owne	d				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					r) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			and 5) Securit Benefic Owned		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(	(A) or (D)	Price		Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
Common Stock 03/11/					/2016	016		М		463		A	(1	)	18	8,529		D			
Common Stock 03/11/2					/2016				F <sup>(2)</sup>		154		D	\$115	5.49	18	3,375		D		
Common Stock  Common Stock  Common Stock  Table II - Derivative e.g., p.  1. Title of Derivative Security or Exercise (Month/Day/Year)  Security  Date (Month/IIII)  Date (Month/IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII					1/2016	2016			S <sup>(3)</sup>		309		D	\$115	5.32	18,066			D		
		٦	able II -						uired, E s, option							wned					
Derivative Security	Conversion or Exercise Price of Derivative	n Date	Execution if any	n Date,	4. Transa Code ( 8)		5. Number (		Expiration	6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4)			Dei Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares							
Restricted	(1)	02/11/2016			M		1	<sub>462</sub>	(4)		(4)	Comr	mon	463		¢0	2 121(5)	, I	D	1	

## **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. Stock withholding to satisfy tax withholding obligations.
- 3. Pursuant to a plan in accordance with Rule 10b5-1 under the Securities Exchange Act of 1934.
- 4. The Restricted Stock Units vest in three equal annual installments beginning on 3/11/2016.
- 5. This number reflects the aggregate number of Restricted Stock Units held by the reporting person.

/s/ F. Samuel Eberts III 03/15/2016

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.