FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATEMENT	OF	CHANGES	N	BENEFICIAL	OWNERSHIP

S

OMB APPR	OVAL				
OMB Number:	3235-0287				
Estimated average bur	den				
hours per response:	0.5				

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* DiVincenzo Jonathan P.					L.A	2. Issuer Name and Ticker or Trading Symbol LABORATORY CORP OF AMERICA HOLDINGS [LH]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify				
(Last) 531 SOU		First) (Middle) NG STREET				3. Date of Earliest Transaction (Month/Day/Year) 12/15/2023									below		ntral I	below) Labs & Int	tl
(Street) BURLIN	IGTON	NC	27215		4. 11	f Amer	ndmen	t, Date	of Origina	l File	d (Month/E	Oay/Year)		Line) K Form	filed by On	e Repo	g (Check Ap orting Perso n One Repo	n
(City)		(State)	(Zip)			Check	k this boy	ox to ind	dicate that a defense c	trans	ons of Rule	made purs 10b5-1(c)	suant . See	Instructio	n 10.		n plan tl	hat is intende	ed to
Date			2. Transa	2. Transaction 2.4 Date Ex (Month/Day/Year) if		2A. Deemed Execution Date,		3. Transa Code (3. 4. Securi Transaction Disposed Code (Instr. 5)		ities Acqu	ired ((A) or	5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)		Price	Transact	Reported Fransaction(s) Instr. 3 and 4)				
Common Stock			12/15	/2023				M		64	A	1	(1)	3,373	3.5491(2)		D		
Common	Stock			12/15	5/2023	2023			F ⁽³⁾		19	19 D \$2		\$219.5	9.5 3,354.5491 ⁽²⁾			D	
		-	Γable II -								osed of				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercis or Exercis Price of Derivative Security		e (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	Date, Transac				6. Date Ex Expiration (Month/Da	•	nd 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)		ecurity	s. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	OI N OI S	umber					
Restricted Stock Unit	(1)	12/15/2023			M			64	(4)		(4)	Commo	n	64	\$0	4,806 ^{(:}	5)	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. Amount includes 19.4137 shares acquired on May 31, 2023 under the Laboratory Corporation of America Holdings 2016 Employee Stock Purchase Plan.
- 3. Stock withholding to satisfy tax withholding obligations.
- 4. The Restricted Stock Units that have vested were part of a grant that vests in two equal annual installments beginning on December 15, 2023.
- 5. This number reflects the aggregate number of Restricted Stock Units held by the reporting person. Amount includes an additional 170 Restricted Stock Units resulting from the final adjustment ratio calculated pursuant to the terms of the Employee Matters Agreement by and between Laboratory Corporation of America Holdings and Fortrea Holdings Inc.

/s/ Sandra D. van der Vaart,

Attorney-in-Fact for Jonathan 12/19/2023

P. DiVincenzo

** Signature of Reporting Person Date

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.