## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to 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*  Brecher Mark E						LA	2. Issuer Name <b>and</b> Ticker or Trading Symbol LABORATORY CORP OF AMERICA HOLDINGS [ LH ]									Check all a Dir	hip of Reportii pplicable) ector icer (give title	Ü	10% O	
(Last) (First) (Middle) 531 SOUTH SPRING STREET						3. Date of Earliest Transaction (Month/Day/Year) 02/28/2012										Chief Medic		below)		
(Street) BURLIN (City)		IC State)		7215 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine) X Fo Fo					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				Date	e nth/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year		Code (	Transaction Disposed Code (Instr. 5)		rities Acquired (A) ed Of (D) (Instr. 3,			nd Secu Bene Own	nount of irities eficially ed Following orted	For (D)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount	() ()	A) or O)	Price	Tran	nsaction(s) tr. 3 and 4)			(1130.4)
Common	Stock				02/28	8/2012	2			A		1,400	)	Α	\$	0	5,943 D			
			Та	ble II - D (e								sed of, onvertib				y Owne	d			
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Executio urity or Exercise (Month/Day/Year) if any		3A. Deeme Execution if any (Month/Da	Date, Transaction Code (Ins					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Sha	nber					

**Explanation of Responses:** 

/s/ F. Samuel Eberts III,

Attorney-in-Fact for Mark E. 03/01/2012

**Brecher** 

\*\* 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.