FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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0.5

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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 Se	ection 30(n) of the in	ivestme	nt Coi	mpany Act of	1940					
Name and Address of Reporting Person* Dodson Edward T				2. Issuer Name and Ticker or Trading Symbol LABORATORY CORP OF AMERICA HOLDINGS [LH]							ationship of Reportin k all applicable) Director Officer (give title	ssuer Owner (specify		
(Last) 213 MAPLE AV	(First) ENUE	(Middle)			re of Earliest Transa 9/2017	action (N	/lonth/	/Day/Year)	X	Principal Accounting Officer				
Street) BURLINGTON (City)	NC (State)	27215 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Та	ble I - No	n-Deriva	tive S	Securities Acq	uired	, Dis	posed of,	or Ber	neficially	Owned			
Date			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Common Stock			02/09/2	017		M		450	A	(1)	3,367.5849 ⁽²⁾	D		
Common Stock			02/09/2	017		F ⁽³⁾		138	D	\$133.83	3,229.5849(2)	D		
		Table II -	Derivativ	ν <u>α</u>	curities Acqui	irad [Dien	osed of a	r Rono	ficially O	wned			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, 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. Transaction Code (Instr. 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)	02/09/2017		M			450	(4)	(4)	Common Stock	450	\$0	2,990 ⁽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 155.1793 shares acquired on June 30, 2016 under the Laboratory Corporation of America Holdings 1997 Employee Stock Purchase Plan and 45.841 shares acquired on December 31, 2016 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 vest in three equal annual installments beginning on 2/9/17.
- 5. This number reflects the aggregate number of Restricted Stock Units held by the reporting person.

/s/ F. Samuel Eberts III, Attorney-in-Fact for Edward T. 02/13/2017 Dodson

** 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.