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**

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

1. Name and Address of Reporting Person* Schroeder Mark S				2. Issuer Name and Ticker or Trading Symbol LABORATORY CORP OF AMERICA HOLDINGS [ LH ]							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify						
(Last) (First) (Middle) 531 SOUTH SPRING STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024							EVP, Pres Diagnostics & COO						
(Street) BURLINGTON NC 27215				4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tabl	le I - No	n-Deriva	ative \$	Securit	ies Ad	quired	, Dis	sposed (	of, or	Ben	eficial	ly Owne	t			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				y/Year) Execution		Deemed cution Date, y nth/Day/Year)	Code (	Transaction Disposed Of (D) (Instr. 3, 4)				Benefici Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 02/02/2					2024			M		495	A	1	(1)	7,253	.1426(2)		D	
Common Stock 02/02/2					2024			F <sup>(3)</sup> 132		I	)	\$221.5	7,121.1426(2)		D			
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	ercise (Month/Day/Year) if any (Month/Day/Year) ative		4. Transact Code (In	tion of Der Sec (A) Dis of (	posed D) tr. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		e ar)	or Num		Amount or Jumber	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)	

## **Explanation of Responses:**

Restricted

Stock Unit

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

Code

(A) l (D)

495

- 2. Amount includes 70.7404 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.

02/02/2024

- 4. The Restricted Stock Units vested in three equal annual installments beginning on February 2, 2022 and are now fully vested.
- 5. This number reflects the aggregate number of Restricted Stock Units held by the reporting person. Amount includes an additional 269 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

Exercisable Date

/s/ Sandra D. van der Vaart,

Shares

495

\$0

Attorney-in-Fact for Mark S. 02/06/2024

14,543<sup>(5)</sup>

D

Schroeder

Title

Commor

Stock

\*\* 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.