FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	. 05								

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* Rothman Paul				LA	2. Issuer Name and Ticker or Trading Symbol LABCORP HOLDINGS INC. [LH]								(Ch	Relationship eck all appli	icable) or	ng Per	10% Ov	wner	
(Last)	(First)	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/06/2024								Officer below	r (give title)		Other (s below)	specify
531 SOUTH SPRING STREET				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	Street) BURLINGTON NC 27215											Form	Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)					Rı	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 - Nor	n-Deriv	ative	Sec	uritie	es Ac	quired	Dis	posed (of, o	r Ben	eficial	ly Owne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Code	Transaction Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Benefici	es ally Following	Form (D) o	n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 06			06/06	/2024			M		717	·	A	(1)	7	'17		D			
		Т									osed of onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemd Execution if any (Month/Da	Date,		ansaction ode (Instr.		ı of i		6. Date Exercisa Expiration Date (Month/Day/Year		Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)
					Code	v	(A)		Date Exercisal		xpiration ate	Title	0 N	amount or lumber of shares					
Restricted Stock Unit	(1)	06/06/2024			M			717	(2)		(2)	Com		717	\$0	944(3)		D	

Explanation of Responses:

- 1. Each Restricted Stock Unit represents the contingent right to receive one share of Labcorp Holdings Inc. Common Stock
- 2. The Restricted Stock Units vested fully on June 6, 2024.
- 3. This number reflects the aggregate number of Restricted Stock Units held by the reporting person.

Remarks:

On May 17, 2024, Labcorp Holdings Inc. ("LHI") became the successor of Laboratory Corporation of America Holdings ("LCAH") pursuant to LCAH's reorganization into a new holding company structure (the "Reorganization"). The Reorganization resulted in LHI becoming a parent holding company of LCAH but did not alter the proportionate interests of LCAH security holders.

/s/ Sandra D. van der Vaart, Attorney-in-Fact for Paul

06/10/2024

Rothman

** 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.