Edgar Filing: QUEST DIAGNOSTICS INC - Form 4

Form 4	GNOSTICS INC							
February 17, 2 FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct	4 UNITED S box str STATEMI Filed pursu Section 17(a)	Was ENT OF CHAN uant to Section 10) of the Public Ut	ITIES AND EXCHANGE hington, D.C. 20549 GES IN BENEFICIAL OW SECURITIES 6(a) of the Securities Exchangility Holding Company Act of 19	VNERSHIP OF ge Act of 1934, of 1935 or Sectio	OMB Number: Expires: Estimated a burden hou response	irs per		
1(b). (Print or Type Re	esponses)							
1. Name and Ad	ldress of Reporting Po O THOMAS F	Symbol	QUEST DIAGNOSTICS INC		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 1290 WALL	(First) (Mi	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 02/15/2006		Director 10% Owner X Officer (give title Other (specify below) VP&Corporate Controller			
LYNDHURS	(Street) ST, NJ 07071		4. If Amendment, Date Original Filed(Month/Day/Year)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Z	Zip) Table	e I - Non-Derivative Securities Ac		f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock			Code V Amount (D) File	1,299 <u>(1)</u>	D			
Common Stock				2,850 (2)	I	401K		
Common Stock				2,200	I	By IRA		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control

Edgar Filing: QUEST DIAGNOSTICS INC - Form 4

number.

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. Transactio Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Options (Right to buy)	\$ 52.235	02/15/2006		А	15,000	02/15/2007 <u>(3)</u>	02/15/2013	Common Stock	15,000

Reporting Owners

Reporting Owner Name / Address			Relationships		
	Director	10% Owner	Officer	Other	
BONGIORNO THOMAS F 1290 WALL STREET WEST LYNDHURST, NJ 07071			VP&Corporate Controller		
Signatures					

Sirisha Gummaregula 02/17/2006 **Signature of Date Reporting Person

Explanation of Responses:

- * 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).
- On June 20, 2005, the Company effected a 2-for-1 stock split of its Common Stock in the form of a 100% stock dividend. All prior
 (1) holdings, including stock options, have been adjusted to reflect the stock split. This amount also includes exempt purchases made under the Company's stock purchase plan since the date of the last filing on Form 4.

(2) These underlying shares were acquired on a periodic basis by the trustee of the Company's tax qualified Profit Sharing (401(k) and/or Supplemental Deferred Compensation Plan. The information was obtained from the plan administrator as of a recent date. The number of shares is based on the account balance of the Company stock fund under the plan (which includes some money market instruments) divided by the market price of the Company's stock as of that date.

(3) The option vests in three equal annual installments beginning on the first anniversary of this grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.