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Kingsley Lav Form 4 July 31, 2017												
FORM	14 UNITED	статес	SECUI	оттес а	ND EV	СПА	NCE C	OMMISSION		PROVAL		
	UNITED	SIAILS		shington,			INGE U	OMMINISSION	OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 Eiled purcuant to Section			SECUR	RITIES				Expires: Estimated a burden hour response	•			
obligatio may cont See Instru 1(b).	ns inue. Section 17(a) of the	Public U		ding Cor	npan	y Act of	Act of 1934, 1935 or Section 0	I			
(Print or Type I	Responses)											
Kingsley Lawrence D Symbol IDEXX			Symbol	X LABORATORIES INC /DE				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			e of Earliest Transaction n/Day/Year) /2017				X_ Director 10% Owner Officer (give title Other (specify below) below)					
Filed(Mor				endment, Date Original onth/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 				
	OK, ME 04092							Person		porting		
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative	Secur	ities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	sposed 4 and (A) or	d of (D)	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	07/28/2017			А	112 <u>(1)</u>	А	\$ 167.52	1,344	D			

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 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. Transac Code (Instr. 8	5. tionNumber of) Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3,	(Month/Day/Year) rivative curities quired) or sposed (D)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code	4, and 5) V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Kingsley Lawrence D C/O IDEXX LABORATORIES, INC. ONE IDEXX DRIVE WESTBROOK, ME 04092	Х						
Signatures							
/s/ Lily J. Lu, Attorney-in-Fact for Law Kingsley	07/31/2017						
<u>**</u> Signature of Reporting Person	Date						

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).

Represents deferred stock units acquired pursuant to the IDEXX Laboratories, Inc. Director Deferred Compensation Plan (the "Plan") in accordance with Rule 16b-3. The number of deferred stock units, rounded up or down to the nearest whole unit, is determined by dividing the amount of cash compensation deferred pursuant to the Plan (\$18,750.00) by the closing price of IDEXX Laboratories, Inc. common (1) stock on the date of the deferral, or if no such price is reported for that date, the closing price for the next preceding date for which such

price was reported. Each deferred stock unit represents a contingent right to receive one share of IDEXX Laboratories, Inc. common stock. The deferred stock units vest immediately upon grant and are payable only as common stock one year following the Director's resignation from the Board of Directors or on such other nondiscretionary and objectively determinable date(s) selected in accordance with the terms of the Plan.

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.