## Edgar Filing: IDEXX LABORATORIES INC /DE - Form 4

IDEXX LABORATO Form 4 May 08, 2015	RIES INC /DE	5								
									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this box if no longer of a TEN TEN TEN OF CHANGES IN DENERICIAL OWNERSHIP OF						Expires:	January 31, 2005			
subject to Section 16. Form 4 or					'NERSHIP OF	burden hou	Estimated average burden hours per response 0.5			
Form 5 obligations may continue.Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940										
(Print or Type Responses)										
MURRAY ROBERT J Syml			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
	IDEXX [IDXX]	IDEXX LABORATORIES INC /DE [IDXX]				(Check all applicable)				
(Mo			3. Date of Earliest Transaction (Month/Day/Year) 05/06/2015				X_ Director10% Owner Officer (give titleOther (specify below)below)			
ONE IDEXX DRIVE 05/0			05/06/2015							
			f Amendment, Date Original ed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WESTBROOK, ME	04092						Form filed by M Person	More than One R	eporting	
(City) (State)	(Zip)	Table	e I - Non-Do	erivative	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
(Instr. 3) any		on Date, if TransactionAcquired (A) or Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A)			))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common 05/06/20 Stock	015		М	290	A	\$0	36,347 <u>(1)</u>	D		
Common Stock							3,500	Ι	By Spouse	
Common Stock							6,087 <u>(1)</u> <u>(2)</u>	Ι	By 2012 GRAT	

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

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#### 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 on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)				8. Price Derivat Securit (Instr. 1
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Unit	<u>(3)</u>	05/06/2015		М	290	(3)	(3)	Common Stock	290	\$ 0

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1 0	Director	10% Owner	Officer	Other			
MURRAY ROBERT J ONE IDEXX DRIVE WESTBROOK, ME 04092	Х						
Ciamaturaa							

## Signatures

Lily J. Lu, Attorney-in-Fact for Robert J. Murray

\*\*Signature of Reporting Person

Date

05/08/2015

# **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).
- (1) Reflects change in form of ownership of 2,161 shares from indirect through Grantor Retained Annuity Trust formed on 12/20/2012 (2012 GRAT) to direct, following 2012 GRAT annuity payment to the reporting person on 2/27/2015.
- (2) This reflects the correction of a typographical error on Form 4 filed by the reporting person on 11/19/2014, which incorrectly stated the shares held by the 2012 GRAT as 8,428 instead of the correct number, 8,248.
- (3) Each restricted stock unit represents a contingent right to receive one share of IDEXX Laboratories, Inc. common stock. Represents restricted stock units previously granted on 05/07/2014 that have vested.

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.