Edgar Filing: SZOSTAK M ANNE - Form 4

SZOSTAK Form 4	M ANNE									
May 11, 20	18									
FORM	ЛЛ								PPROVAL	
	UNITED	STATES		RITIES An ashington			E COMMISSION	OMB Number:	3235-0287	
Check t if no lor subject Section Form 4 Form 5	or Filed pur	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							Lanuary 31Expires:2005Estimated averageburden hours perresponse0.5	
obligation may con <i>See</i> Inst 1(b). (Print or Type	ons Section 17(ruction	(a) of the	Public U	Jtility Ho	lding Cor		of 1935 or Section	on		
1. Name and SZOSTAK	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer					
	IDEXX LABORATORIES INC /DI [IDXX]				E (Check all applicable)					
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)			X_ Director10% Owner Officer (give titleOther (specify below)below)				
ONE IDEXX DRIVE			05/09/2018					0010(1)		
(Street)			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				
WESTBRO	DOK, ME 04092						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative	Securities A	Acquired, Disposed (of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	Date, if	3. Transactio Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A)	Securities Beneficially Owned	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)			
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially own	ned directly	or indirectly.			
					inforn requir	nation con ed to resp lys a curre	spond to the collect tained in this form ond unless the for ntly valid OMB co	are not m	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 3	8)	Acquired (A) or Disposed (D) (Instr. 3, and 5)	l of				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Deferred Stock Unit	<u>(1)</u>	05/09/2018		А		224		<u>(1)</u>	<u>(1)</u>	Common Stock	224
Non-Qualified Stock Option (right-to-buy)	\$ 206.62	05/09/2018		А		2,187		(2)	05/08/2028	Common Stock	2,18

Reporting Owners

Reporting Owner Name / Address		Relationsh							
	Director	10% Owner	Officer	Other					
SZOSTAK M ANNE ONE IDEXX DRIVE WESTBROOK, ME 04092	Х								
Signatures									
/s/ Lily J. Lu, Attorney-in-Fact Szostak	nne	05/11/2018							
<u>**</u> Signature of Reporting P		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).

Each deferred stock unit represents a contingent right to receive one share of IDEXX Laboratories, Inc. common stock. Deferred stock(1) units vest in one installment on the one year anniversary of the date of grant or on the date of the 2019 annual meeting of shareholders, whichever event is earlier, and are payable as common stock one year following the Director's resignation from the Board of Directors.

- (2) Grant of option to buy shares of IDEXX Laboratories, Inc. common stock that vest in one installment on the one year anniversary of the date of grant or on the date of the 2019 annual meeting of shareholders, whichever event is earlier.
- (3) Not applicable.

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.