Edgar Filing: THOMPSON DAVID - Form 4

THOMPSON	DAVID											
Form 4	111											
August 01, 20												
FORM	4		a anaun			ID EXC					PPROVAL	
	UNIII	ED STATE				ND EXC D.C. 205		NGE	COMMISSION	OMB Number:	3235-0287	
Check this										Expires:	January 31,	
if no longer subject to STATEMENT OF CHANC					GES IN BENEFICIAL OWNERSHIP					Estimated	2005 Laverage	
Section 16	GEGUDIDIDEG							burden hours per				
Form 4 or								response	0.5			
Form 5 obligation	-	^						-	ge Act of 1934,			
may conti	Section			•		•	• •		f 1935 or Sectio	n		
<i>See</i> Instruction 1(b).	ction	30(h) of the Inv	vestmer	nt C	Company	y Act	of 19	40			
(Print or Type R	esponses)											
1. Name and Address of Reporting Person * THOMPSON DAVID2. Issuer Symbol								-	5. Relationship of Reporting Person(s) to Issuer			
			EXACT	SCIEN	ICE	ES COR	P [E2	XAS]	(Cheo	ck all applicable	e)	
(Last)	(First)	(Middle)	3. Date of	Earliest '	Trai	nsaction			(- /	
			(Month/D	•					_X_ Director		6 Owner	
C/O EXACT			07/28/20)11					Officer (give below)	title Oth below)	er (specify	
CORP., 441	CHARMAN	Y DRIVE							,	,		
(Street) 4. If An			4. If Amer	Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
Filed(Mon				Ionth/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
MADISON,	WI 53719								_X_ Form filed by M Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non	-De	rivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction	Date 2A. De	emed	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Y	· · · · · · · · · · · · · · · · · · ·	ion Date, if		ctio	nAcquired			Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month	ny Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned		Beneficial Ownership	
		((-)	(-)	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
~				Code	V	Amount	(D)	Price	(msu. 5 and +)			
Common Stock (1)	07/28/2011			А		9,977	А	\$0	27,470	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)

Edgar Filing: THOMPSON DAVID - Form 4

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 orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (right to buy)	\$ 8.52	07/28/2011		A	15,772	(2)	07/28/2021	Common Stock	15,772
Stock Option (right to buy)	\$ 8.52	07/28/2011		А	5,257	(3)	07/28/2021	Common Stock	5,257

Reporting Owners

Reporting Owner Name / Address	Relationships						
Toporting of the Taulo, Haaross	Director	10% Owner	Officer Other				
THOMPSON DAVID C/O EXACT SCIENCES CORP. 441 CHARMANY DRIVE MADISON, WI 53719	Х						
Signatures							
/s/ David Thompson by Mark R. E Attorney-in-Fact	Busch,		0	8/01/2011			
<u>**</u> Signature of Reporting Pe	rson			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).
- (1) These shares of restricted stock were issued pursuant to the Company's non-employee director compensation policy.
- (2) This option vests in three equal annual installments beginning on the one year anniversary of the grant date.
- (3) This option vests in full on the one year anniversary of the grant date or, if earlier, the date of the next annual meeting of the Company's stockholders.

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.

8 E S ()