Edgar Filing: EXACT SCIENCES CORP - Form 4

EXACT SCI	ENCES CORP											
Form 4	_											
July 05, 2016												
FORM	4	ОСТАТЕС	SECUE	TTIE	C A	ND EV(NCEC	OMMISSION		PPROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287				
Check the if no long	ter.			GE G						Expires:	January 31 2005	
subject to Section 16. Form 4 or Form 5 Filed pursuant to Sect				SEC	UR	ITIES				Estimated average burden hours per response		
obligation may cont <i>See</i> Instru 1(b).	ns Section 17	(a) of the		ility I	Hold	ling Con	ipany	Act of	1935 or Section	I		
(Print or Type F	Responses)											
COWARD D SCOTT Symbol				er Name and Ticker or Trading CT SCIENCES CORP [EXAS]					5. Relationship of Reporting Person(s) to Issuer			
									(Check all applicable)			
				te of Earliest Transaction th/Day/Year) 0/2016					Director 10% Owner X_ Officer (give title Other (specify below) below)			
CORP., 441	CHARMANY	DRIVE							/	General Cour	sel	
				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			
(City)	(State)	(Zip)			_		~		Person			
(City)	(State)	(Ziþ)	Tabl	e I - No	on-D	erivative	Securi	ities Acqu	uired, Disposed of	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	:) Executio any	med n Date, if Day/Year)	Code (Instr. 3, 4 and 5)				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				Code	V	Amount 2,325	(D)	Price				
Stock	05/02/2016			А	V	<u>(1)</u>	А	\$ 5.95	21,654	D		
Common Stock	06/30/2016			Μ		4,687 (2)	А	\$ 0	26,341	D		
Common Stock	07/01/2016			S		1,644 (3)	D	\$ 12.28	24,697	D		
Common Stock									2,524	I	Held in 401(K) Account	

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

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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. Transacti Code (Instr. 8)	Transaction of Derivative Code Securities		ve Expiration Date (Month/Day/Year) f		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	
Restricted Stock Units	<u>(4)</u>	06/30/2016		М	4,687	(5)	(5)	Common Stock	4,687	\$

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
COWARD D SCOTT C/O EXACT SCIENCES CORP. 441 CHARMANY DRIVE MADISON, WI 53719			SVP and General Counsel			
Signatures						
/s/ D. Scott Coward by Mark R. Be attorney-in-fact	usch,		07/05/2016			
<u>**</u> Signature of Reporting Pers	son		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) Represents shares purchased through Employee Stock Purchase Plan.
- (2) Represents shares of common stock received upon vesting of a restricted stock unit award.
- (3) Represents shares sold pursuant to a Sell-to-Cover Rule 10b5-1 Plan to pay withholding taxes due in connection with the vesting of certain restricted stock units on June 30, 2016.
- (4) Each restricted stock unit represents a contingent right to receive one share of common stock.

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Represents a restricted stock unit award granted on January 1, 2015 that partially vested on June 30, 2016. The restricted stock units vest

(5) as follows: one-quarter on the first anniversary of the grant date and the balance in equal quarterly installments over the three year period beginning on the one-year anniversary of the grant date.

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.