#### ORASURE TECHNOLOGIES INC

Form 4

February 05, 2014

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB

**OMB APPROVAL** 

Number:

3235-0287

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Check this box if no longer subject to Section 16. Form 4 or Form 5

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

obligations may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SPAIR RONALD H	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer		
	ORASURE TECHNOLOGIES INC [OSUR]	(Check all applicable)		
(Last) (First) (Middle)	3. Date of Earliest Transaction	X Director 10% Owner X Officer (give title Other (specify		
220 EAST FIRST STREET	(Month/Day/Year) 02/01/2014	below) below)  COO & CFO		
(Street)	4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check		
	Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting		
BETHLEHEM, PA 18015		Person		

(City)	(State)	(Zip) Ta	ble I - Non	-Derivativ	e Secı	ırities Ac	quired, Disposed	l of, or Benef	icially Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit on(A) or Dis (Instr. 3, 4)	sposed	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	02/01/2014	02/03/2014	F(1)	8,113	D	\$ 5.715	164,346	D	
Common stock	02/01/2014	02/03/2014	F <u>(1)</u>	257	D	\$ 5.715	33,923	I	By Non-qualified Deferred Compensation Plan
Common stock	02/03/2014		A(2)	44,959	A	\$ 5.715	78,882	I	By Non-qualified Deferred Compensation Plan

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

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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. Transaction Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (I (Instr. 3, 4, and 5)	tive Expiration Date ties (Month/Day/Year) red (A) or red of (D)		ate	7. Title and Amoun Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (I			Expiration Date	Title	Amo Numl Share
Nonqualified stock option	\$ 5.715	02/03/2014		A(3)	128,599		<u>(3)</u>	02/03/2024	Common stock	128

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SPAIR RONALD H 220 EAST FIRST STREET BETHLEHEM, PA 18015	X		COO & CFO				

## **Signatures**

Mark L. Kuna, as Attorney-In-Fact for Ronald H. Spair (Power of Attorney previously filed)

02/05/2014

(9-02)

\*\*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).
- Withholding of shares to pay the tax liability associated with vesting of restricted shares.
- Grant of restricted shares under the OraSure Technologies, Inc. Stock Award Plan, with one-third of the grant vesting on February 3, **(2)** 2015, February 3, 2016, and February 3, 2017. Vesting shall cease upon voluntary termination of employment.
- Grant of nonqualified stock options, vesting and exercisable over a four year period, with one-fourth of the options vesting on the first (3) anniversary date of the grant and the remainder vesting ratably on a monthly basis, over the remaining 36 months. Vesting shall cease upon voluntary termination of employment.

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.

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