## Edgar Filing: LEVANGIE DANIEL J - Form 4

LEVANGIE	DANIEL J											
Form 4												
July 20, 2010	)											
FORM	4									-	PPROVAL	
	UNITE	D STATE		ITIES hingtor				NGE (	COMMISSION	OMB Number:	3235-0287	
Check this				_						Expires:	January 31,	
subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL C					LOW	NERSHIP OF	•	2005			
Section 16	5.	SECURITIES							Estimated average burden hours per			
Form 4 or									response	•		
Form 5	Filed p	oursuant to	Section 16	5(a) of t	he	Securiti	es Ex	kchang	ge Act of 1934,			
obligation may conti	Nection 1			•		•	- ·		f 1935 or Sectio	n		
See Instru		30(h)	) of the Inv	vestmer	nt C	Company	y Act	of 19	40			
1(b).												
(Print or Type R	(searonse											
(I fint of Type K	esponses)											
LEVANCIE DANIEL I				2. Issuer Name <b>and</b> Ticker or Trading Symbol				g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			2	EXACT SCIENCES CORP [EXAS]								
(Last)	(Check (First) (Middle) 3. Date of Earliest Transaction				c all applicable)							
, , ,	× ,	``´´	(Month/D						X Director	10%	6 Owner	
C/O EXACT	SCIENCES		07/16/20	-					Officer (give		er (specify	
CORP., 441	CHARMANY	I DRIVE							below)	below)		
	(Street)		4. If Amer	ndment, I	Date	Original			6. Individual or Jo	oint/Group Filin	ng(Check	
			Filed(Mon	Filed(Month/Day/Year)					Applicable Line)			
									_X_ Form filed by (			
MADISON,	WI 53719								Form filed by M Person	fore than One K	eporting	
(City)	(State)	(Zip)	Table	e I - Non-	-Dei	rivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction I	Date 2A. De	emed	3.		4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	ear) Executi	ion Date, if	Transac	ction	Acquired	l (A) o	r	Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month	(Day/Vaar)	CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				·	2		Beneficial	
		(INIOIIUI	/Day/Year)	(instr. c	5)	(Instr. 5,	4 and	3)		Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
							( • )		Reported	(1115411-1)	(110411-1)	
							(A) or		Transaction(s)			
				Code	V	Amount		Price	(Instr. 3 and 4)			
Common Stock <sup>(1)</sup>	07/16/2010			А		5,831	A	\$0	5,831	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)

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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. 5. Number of TransactiorDerivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exer Expiration D (Month/Day	ate	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)	\$ 3.43	07/16/2010		A	19,168	(2)	07/16/2020	Common Stock	19,168
Stock Option (right to buy)	\$ 3.43	07/16/2010		А	7,667	<u>(3)</u>	07/16/2010	Common Stock	7,667

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
LEVANGIE DANIEL J C/O EXACT SCIENCES CORP. 441 CHARMANY DRIVE MADISON, WI 53719	Х							
Signatures								
/s/ Daniel J. Levangie by Mark R. Attorney-in-Fact	Busch,			07/20/2010				
**Signature of Reporting P	erson			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.

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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