

# SECURITIES AND EXCHANGE COMMISSION

## FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2013-05-16** | Period of Report: **2013-05-14**  
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### REPORTING OWNER

#### **LANCASTER RONNY B**

CIK: **1238960**

Type: **4** | Act: **34** | File No.: **001-16537** | Film No.: **13851965**

Mailing Address  
*ORASURE TECHNOLOGIES  
INC  
220 EAST FIRST STREET  
BETHLEHEM PA 18015*

### ISSUER

#### **ORASURE TECHNOLOGIES INC**

CIK: **1116463** | IRS No.: **364370966** | State of Incorporation: **DE** | Fiscal Year End: **1231**  
SIC: **3841** Surgical & medical instruments & apparatus

Mailing Address  
*150 WEBSTER ST  
BETHLEHEM PA 18015*

Business Address  
*150 WEBSTER ST  
BETHLEHEM PA 18015  
5036416115*

# FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### OMB APPROVAL

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <b>LANCASTER RONNY B</b>			2. Issuer Name and Ticker or Trading Symbol <b>ORASURE TECHNOLOGIES INC</b> <b>[OSUR]</b>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <b>05/14/2013</b>			6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person		
220 EAST FIRST STREET			4. If Amendment, Date Original Filed(Month/Day/Year)					
(Street) <b>BETHLEHEM, PA 18015</b>								
(City)	(State)	(Zip)						

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common stock	05/14/2013		A	(1)	17,505	A	(1)	36,334	D	
Common stock	05/15/2013		F	(2)	2,966	D	\$4.495	33,368	D	

**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 Derivative 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 Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V		Date Exercisable	Expiration Date					

#### Explanation of Responses:

1. Grant of restricted shares under the OraSure Technologies, Inc. Stock Award Plan, cliff vesting on May 13, 2014. Vesting shall cease immediately if the named individual voluntarily ceases to serve as a member of the Board of Directors.
2. Withholding of shares to pay the tax liability associated with vesting of restricted shares.

### Signatures

Mark L. Kuna, As Attorney-In-Fact for Ronny B. Lancaster. (Power of Attorney previously filed)

05/16/2013

\*\* Signature of Reporting Person

Date

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

\* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

**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 Number.**