## Edgar Filing: CRAIG THOMAS - Form 4

CRAIG THO	DMAS								
Form 4 May 02, 201	2								
FORM						OMB AF	PROVAL		
	UNITED STA		RITIES AND EXCHANGE COMMISSION shington, D.C. 20549			OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 o Form 5	ger <b>STATEMEN</b> ' 6. r	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligations may continue. See Instruction 1(b). 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									
(Print or Type Responses)									
1. Name and A CRAIG TH	Address of Reporting Person OMAS	Symbol		Issue	5. Relationship of Reporting Person(s) to Issuer				
IDEXX [IDXX			RATORIES IN	C /DE	(Check all applicable)				
(Last) (First) (Middle) 3. Date of (Month/D ONE IDEXX DRIVE 04/30/20			Fransaction		XDirector10% Owner Officer (give titleOther (specify below) below)				
			Date Original ar)	Appl	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
WESTBROOK, ME 04092 — Form filed by More than One Reporting Person									
(City)	(State) (Zip)	Table I - Non-	Derivative Secur	ities Acquired	l, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	any		4. Securities A tion(A) or Dispose (Instr. 3, 4 and)	d of (D) Sec 5) Ber Ow Fol	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
G		Code	(A) or V Amount (D)	Tra	str. 3 and 4)				
Common Stock	04/30/2012	А	199 <u>(1)</u> A	87.93 10, $(1)$	,721	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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address							
	Director	10% Owner	Officer	Other			
CRAIG THOMAS ONE IDEXX DRIVE WESTBROOK, ME 04092	Х						
Signatures							
Jennifer L. Panciocco, Attorne Craig		05/02/2012					
***************************************	D						

\*\*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).

Represents deferred stock units acquired pursuant to the IDEXX Laboratories, Inc. Director Deferred Compensation Plan (the "Plan") in accordance with Rule 16b-3. The number of deferred stock units, rounded up or down to the nearest whole unit, is determined by dividing the amount of cash compensation deferred pursuant to the Plan (\$17,500) by the closing price of IDEXX Laboratories, Inc. common stock

(1) on the date of the deferral. Each deferred stock unit represents a contingent right to receive one share of IDEXX Laboratories, Inc. common stock. The deferred stock units vest immediately upon grant and are payable only as common stock one year following the Director's resignation from the Board of Directors or on such other nondiscretionary and objectively determinable date(s) selected in accordance with the terms of the Plan.

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.