Edgar Filing: Mendez Manuel O. - Form 4

Mendez Manu Form 4	el O.										
January 26, 20)10										
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								PROVAL 3235-0287		
Check this if no longer subject to Section 16. Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b).	Filed p Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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							Expires: Estimated a burden hou response	Expires:January 31, 2005Estimated average burden hours per response0.5	
(Print or Type Re	sponses)										
1. Name and Address of Reporting Person <u>*</u> Mendez Manuel O.			2. Issuer Name and Ticker or Trading Symbol ORASURE TECHNOLOGIES INC [OSUR]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 220 EAST FIRST STREET			3. Date of Earliest Transaction (Month/Day/Year) 01/25/2010					Director 10% Owner X Officer (give title Other (specify below) below) VP Marketing & Sales			
				If Amendment, Date Original ed(Month/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 			
BETHLEHEN	M, PA 18015							Person	More than One R	eporung	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecuri	ties Ace	quired, Disposed o	of, or Beneficia	lly Owned	
	2. Transaction I (Month/Day/Ye	ar) Executi any	emed on Date, if /Day/Year)	Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	(A) o 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	01/25/2010			A <u>(1)</u>	8,930	A	<u>(1)</u>	8,930	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. Transacti Code (Instr. 8)	5. Number of orDerivative 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
NonQual. Stock Options	\$ 5.19	01/25/2010		A <u>(2)</u>	15,170	(2)	01/25/2020	Common Stock	15,170

Reporting Owners

6 Owner Officer	Other	
VP Marketing &	& Sales	
2		6 Owner Officer Other VP Marketing & Sales

Signatures

Mark L. Kuna, as Attorney-In-Fact for Manuel O. Mendez (Power of Attorney previously 01/26/2010 filed).

<u>**</u>Signature of Reporting Person

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) Grant of restricted shares under the OraSure Technologies, Inc. 2000 Stock Award Plan, with one-third of the grant vesting on January 25, 2011, January 25, 2012, and January 25, 2013. 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(2) 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.

Date