

Weber Kathleen Gallagher  
 Form 3  
 January 04, 2019

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF 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  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

|   |         |          |   |  |  |
|---|---------|----------|---|--|--|
| 1. Name and Address of Reporting Person * |         |          | 2. Date of Event Requiring Statement (Month/Day/Year) | 3. Issuer Name <b>and</b> Ticker or Trading Symbol   |  |
| Â Weber Kathleen Gallagher                |         |          | 01/01/2019  | ORASURE TECHNOLOGIES INC [OSUR]  |  |
| (Last)                                    | (First) | (Middle) |   | 4. Relationship of Reporting Person(s) to Issuer   | 5. If Amendment, Date Original Filed(Month/Day/Year)                   |
| 220 EAST FIRST STREET                     |         |          |   |  |  |
| (Street)                                  |         |          |   | (Check all applicable)   |  |
| BETHLEHEM,Â PAÂ 18015-1360                |         |          |   | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner                               | 6. Individual or Joint/Group Filing(Check Applicable Line)             |
| (City)                                    | (State) | (Zip)    |   | <input type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) | <input checked="" type="checkbox"/> Form filed by One Reporting Person |
|   |         |          |   | EVP & BU Lead - Molecular  | <input type="checkbox"/> Form filed by More than One Reporting Person  |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---------------------------------|---|--|---|
| Common Stock <sup>(1)</sup>     | 9,066 <sup>(2)</sup>                                  | D  | Â   |
| Common Stock <sup>(1)</sup>     | 9,100 <sup>(3)</sup>                                  | D  | Â   |
| Common Stock <sup>(1)</sup>     | 8,008 <sup>(4)</sup>                                  | D  | Â   |

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership |
|--|--|--|---------------------------|----------------------|--|
|--|--|--|---------------------------|----------------------|--|

## Edgar Filing: Weber Kathleen Gallagher - Form 3

|                       | Date Exercisable          | Expiration Date | (Instr. 4)<br>Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect (I) (Instr. 5) | (Instr. 5) |
|-----------------------|---------------------------|-----------------|---------------------|----------------------------|------------------------------|--|------------|
| Option (right to buy) | 02/03/2015 <sup>(5)</sup> | 02/03/2024      | Common Stock        | 4,129                      | \$ 5.7149                    | D  | Â          |
| Option (right to buy) | 02/03/2016 <sup>(6)</sup> | 02/03/2025      | Common Stock        | 10,404                     | \$ 9.31                      | D  | Â          |

## Reporting Owners

| Reporting Owner Name / Address  | Relationships |           |                             |       |
|---|---------------|-----------|-----------------------------|-------|
|   | Director      | 10% Owner | Officer                     | Other |
| Weber Kathleen Gallagher<br>220 EAST FIRST STREET<br>BETHLEHEM, PA 18015-1360 | Â             | Â         | Â EVP & BU Lead - Molecular | Â     |

## Signatures

/s/Jack E. Jerrett As Attorney-In-Fact For Kathleen G. Weber 01/04/2019

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) RSA with vesting schedule
  - (2) Grant of restricted shares under OraSure Technologies, Inc. Stock Award Plan, all of which vest February 1, 2019. Vesting shall cease upon voluntary termination of employment.
  - (3) Grant of restricted shares under OraSure Technologies, Inc. Stock Award Plan, one-half of which vest on February 1, 2019 and the other half on February 1, 2020. Vesting shall cease upon voluntary termination of employment.
  - (4) Grant of restricted shares under OraSure Technologies, Inc. Stock Award Plan, one third of which vest on February 1, 2019, the second third on February 1, 2020 and the final third on February 1, 2021. Vesting shall cease upon voluntary termination of employment.
  - (5) Non-qualified stock options granted on February 3, 2014, vesting 25% at the end of 12 months after the grant date and 75% ratably on a monthly basis over the next 36 months. Vesting shall cease upon voluntary termination of employment.
  - (6) Non-qualified stock options granted on February 3, 2015, vesting 25% at the end of 12 months after the grant date and 75% ratably on a monthly basis over the next 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.