FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT (	OF CHAI	NGES IN BE	ENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Miller Michele Marie					2. Issuer Name and Ticker or Trading Symbol ORASURE TECHNOLOGIES INC [ OSUR ]										hecl	all applica Director	ıble)	g Perso	on(s) to Issu	vner
(Last) 220 EAS	(F ST FIRST S	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/01/2020										X	below) `	give title Finance	and C	Other (s below) Controller	вреспу
(Street) BETHLI (City)		A State)	18015 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)										Indine)	ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
		Ta	able I - Noi	n-Derivat	ive S	ecuriti	es A	Acqu	uired,	Dis	osed	of, c	r Bene	eficia	lly (	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) of Disposed Of (D) (Instr. 3, 4			(A) or 3, 4 and	and 5) Securition Benefici Owned I		ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							ĺ	Code	v	Amoun	it	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock			02/01/2	/2020			<b>F</b> <sup>(1)</sup>		217		D	\$7.1	65	7,8	54		D			
Common	Common Stock			02/01/2	2020			<b>F</b> <sup>(1)</sup>		109		D	\$7.1	65	7,745		D			
Common	Stock			02/01/2	020				<b>F</b> <sup>(1)</sup>		42	9	D \$7.165 7,316 D				D			
Common	Stock			02/01/2	020				A <sup>(2)</sup>		7,5	45	A	\$7.1	\$7.165 14,861 D					
			Table II -	Derivativ											/ O	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	Code	action (Instr.	of Exp		Exp	ate Exer iration D nth/Day/	ate		7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		derlying curity		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e (es Fally [	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exe	e rcisable	Ex <sub>I</sub> Dai	oiration e	Title		Amou or Numb of Share	er					
Option (right to	\$7.165	02/01/2020		A <sup>(3)</sup>		29,071		02/0	01/2021	02/	01/2030	Techi	raSure nologies,	29,07	71	\$7.165	63,60	62	D	

## **Explanation of Responses:**

- 1. Withholding of shares to pay the tax liability associated with vesting of restricted shares
- $2. \ Restricted \ stock \ award \ with \ 3 \ year \ vesting \ schedule$
- 3. Nonqualified stock options, vesting and exercisable over a four year period, with one-fourth of the options vesting on the first anniversary date of the grant and the remainder vesting ratably on a monthly basis, over the remaining 36 months.

## Remarks:

/s/Jack E. Jerrett As Attorney-In-Fact For Michele M. Miller

02/04/2020

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.