## EXACT SCIENCES CORP Form 3 January 05, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

## 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 <u>*</u> COWARD D SCOTT			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol EXACT SCIENCES CORP [EXAS]				
(Last) 441 CHARMA	(First)	(Middle)	01/01/2015	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
	(Street)			Director X Officer (give title below	all applicable) 10% ( Other /) (specify belo General Couns	Owner ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (	(State)	(Zip)	Table I - N	lon-Derivat	ive Securiti	es Bei	neficially Owned	
1.Title of Security (Instr. 4)	,		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	•	
Common Stock	k		800		D	Â		
Reminder: Report owned directly or	-	te line for ea	ch class of securities benefici	ially SI	EC 1473 (7-02	)		
	informa require	ation conta d to respo	oond to the collection of ined in this form are not nd unless the form displ //B control number.					
Tab	le II - Deri	vative Secur	ities Beneficially Owned (e.	g., puts, calls,	warrants, opt	ions, co	onvertible 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 (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Shares

(I) (Inst

(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
COWARD D SCOTT 441 CHARMANY DRIVE MADISON, WI 53719	Â	Â	SVP and General Counsel	Â			
Signatures							
/s/ D. Scott Coward by Mark R. Busch, attorney-in-fact			01/05/2015				
<u>**</u> Signature of Reporting	Date						
<b>Explanation of Re</b>	spor	nses:					

- \* 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).

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# Remarks:

## Exhibit List: Exhibit 24 Power of Attorney

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.