Edgar Filing: STIFTEN EDWARD J - Form 4

STIFTEN EI	DWARD J										
Form 4											
March 03, 20	008										
								OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check the			c	<i>,</i> ,					Expires:	January 31,	
if no long		MENT OF	CHANGES	GES IN BENEFICIAL OWNE				NERSHIP OF	200		
	subject to STATEMENT OF CHARGES IN DEPTETAL OF Section 16. SECURITIES						Estimated average burden hours per				
Form 4 o									response 0.5		
Form 5	Filed pu	irsuant to S	ection 16(a)	of the	e Securit	ies E	xchange	e Act of 1934,			
obligation		(a) of the H	Public Utility	Hold	ing Con	ipany	Act of	1935 or Section	ı		
may cont See Instru		30(h)	of the Investr	nent (Compan	y Ac	t of 194	0			
1(b).					-						
(Print or Type I	Responses)										
1. Name and Address of Reporting Person [*] 2. Issuer Name and Tick				Ticker or							
STIFTEN E	DWARD J		Symbol	ol				Issuer			
EXP				XPRESS SCRIPTS INC [ESRX]				(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earli	est Tra	insaction			(Check	k un applicable)	
			(Month/Day/Ye	h/Day/Year)			Director 10% Owner				
C/O EXPRESS SCRIPTS, 02/28/20				2008				XOfficer (give titleOther (specify below)			
INC., ONE	EXPRESS WA	Y						· · · · · · · · · · · · · · · · · · ·	VP & CFO		
	(Street)		4 If Amendme	nt Dat	o Original					or (Chaok	
	(bucct)		Filed(Month/Day	mendment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)			
Filed(Mon				(In/Day/Year)				_X_ Form filed by One Reporting Person			
ST. LOUIS,	MO 63121							Form filed by M			
511 20015,	110 00121							Person			
(City)	(State)	(Zip)	Table I - N	Non-De	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	te 2A. Deen	ned 3.		4. Securit	ies Ad	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year	r) Execution	Date, if Tran	isactio	n(A) or Di			Securities	Form: Direct	Indirect	
(Instr. 3)		any		Code (Instr. 3, 4 and 5)				Beneficially		Beneficial	
		(Month/D	ay/Year) (Inst	tr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
			Cod	e V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common					1,186	, í	\$				
Stock	02/28/2008		D		(1)	D	ф 63.05	78,352	D		
Stock					_		05.05				

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)

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)	Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	Amou Under Secur	le and ant of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Edgar Filing: STIFTEN EDWARD J - Form 4

Reporting Owners

Reporting Owner Name / Address	1	Relationships							
Toporoing o whom round , round as	Director	10% Owner	Officer	Other					
STIFTEN EDWARD J C/O EXPRESS SCRIPTS, INC ONE EXPRESS WAY ST. LOUIS, MO 63121			EVP & CFO						
Signatures									
Edward Stiften 03	/03/2008								

<u>**</u>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).
- (1) Represents shares tendered to Express Scripts, Inc. to cover Reporting Person's tax liability due upon lapse of restriction of restricted stock previously awarded under Express Scripts, Inc. 2000 Long-Term Incentive 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.