Edgar Filing: Nimrodi Nir - Form 4

Nimrodi Ni	r												
Form 4	• • • • •												
January 08,													
FORM	\mathbf{M} 4 UNITED	остатро	SECU	DITIES		ID EV	CHAN	СБ	COMMISSI			PPROVA	۹L
	UNITED	SIAIES		ashingtoi			EXCHANGE COMMISSION C. 20549			OMB Number:	3235	-0287	
Check t	nger										Expires:	Janua	
if no longer subject to STATEMENT OF CHANGES IN BENEFI						ICIAL	OV	VNERSHIP	OF	Estimated	average	2005	
Section 16.				SECURITIES							burden hou		
Form 4 Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							۲ 4	response		0.5		
obligati									•				
may con See Inst	ntinue. Section 17			nvestmer		•	- ·		of 1935 or Se 940	cuon	L		
1(b).	litetion					•	•						
(Print or Type	Responses)												
		- *											
1. Name and Address of Reporting Person * Nimrodi Nir (Last) (First) (Middle)			 Issuer Name and Ticker or Trading Symbol INTREXON CORP [XON] Date of Earliest Transaction 						5. Relationship of Reporting Person(s) to Issuer				
									(Check	k all applicable)		
20374 SENECA MEADOWS			(Month/Day/Year) 01/02/2018					Director 10% Owner X Officer (give title Other (specify below) below) Chief Business Officer					
PARKWAY			01/02/2018										
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check				
									Applicable Line) _X_ Form filed by One Reporting Person				
GERMAN	TOWN, MD 208	76							Form filed		ore than One R		
(City)	(State)								Person				
	(State)	(Zip)	Tał	ole I - Non-					cquired, Dispos	ed of,	or Beneficia	lly Owne	d
1.Title of	2. Transaction Date					4. Securities nAcquired (A) or			5. Amount of Securities		Ownership orm: Direct	7. Nature of	e of
Security (Instr. 3)	(Month/Day/Year)	Execution any	Date, II	Code	Disposed				Beneficially)) or Indirect	Indirect Benefici	al
(insure)		•		/Year) (Instr. 8) (In					•)	Ownersh	
						Following	(Iı	nstr. 4)	(Instr. 4)	1			
							(A)		Reported Transaction(s)				
				Code V	/ A	mount	or (D) Pri	rice	(Instr. 3 and 4)				
Reminder: Re	eport on a separate lin	ne for each cl	lass of sec	urities ben	efic	ially ow	ned direct	tly o	r indirectly.				
						-			pond to the co	ollect	ion of	SEC 1474	
									ained in this fo			(9-02)	
									nd unless the tly valid OMB				

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8.1
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	De
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Sec

number.

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	,	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					(
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(1)</u>	01/02/2018		A		39,063		(2)	(2)	Common Stock	39,063	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Nimrodi Nir 20374 SENECA MEADOWS PARKWAY GERMANTOWN, MD 20876			Chief Business Officer					
Signatures								
/s/ Nir Nimrodi, by Donald P. Lehr, as attorney-in-fact		01/08/2018						
**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) Each restricted stock unit represents a contingent right to receive one share of XON common stock.

(2) The restricted stock units vest in four equal annual installments beginning January 2, 2019.

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.

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