## Edgar Filing: CODEXIS INC - Form 4

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Form 4													
June 15, 201	6												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB AF	OMB APPROVAL			
Washington, D.C. 20549									OMB Number:	3235-0287			
Check this box if no longer										Expires:	January 31, 2005		
subject to STATEMENT OF CHAN					GES IN BENEFICIAL OWNERSH					Estimated a			
Section 1						SECURITIES				burden hou	rs per		
Form 4 or Form 5			Castion 1	f(a) = f(a)	1	C a avaiti		<b>1</b>	• A • + • f 1024	response (			
obligation		<b>^</b>						•	e Act of 1934, E1935 or Section	n			
may cont	inue.		) of the In	•		<b>U</b>				11			
See Instru 1(b).	iction	50(II	) of the m	vestillen	ii C	Joinpany	Act	01 1 94	ю				
1(0).													
(Print or Type F	Responses)												
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Nam					nd 1	Ficker or T	rading	g	5. Relationship of Reporting Person(s) to				
NICOLS JOHN J Symbol CODEX									Issuer				
				XIS INC [CDXS]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	f Earliest 7	Frai	nsaction			(ence	it un applicable	()		
				h/Day/Year)					_X_Director10% Owner				
	XIS, INC., 20	0	06/13/2	2016					_X_ Officer (give title Other (specify below) below)				
PENOBSCO	DT DRIVE								· · · · · · · · · · · · · · · · · · ·	ident and CEO			
	(Street)		4. If Ame	ndment, D	Date	e Original			6. Individual or Jo	oint/Group Filir	g(Check		
				onth/Day/Year)					Applicable Line)				
									_X_ Form filed by C Form filed by M				
REDWOOD	OCITY, CA 9	4063							Person	Iore mail One Ke	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-	De	erivative S	ecurit	ties Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction			3.		4. Securiti			5. Amount of	6. Ownership			
Security	(Month/Day/Y	on Date, if Transaction(A) or Disposed of (D) $(L + 2A + 15)$						Securities	Form: Direct				
(Instr. 3)		any (Month)	Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)					))	Beneficially Owned		Beneficial Ownership		
		(1.101144)	2 uj, 1 cui)	(115111-0)	,				Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported				
							or		Transaction(s) (Instr. 3 and 4)				
C				Code	V	Amount	(D)	Price					
Common	06/13/2016			F(1)		97,838	D	\$	901,319	D			
Stock								4.08					

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)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	7. Title Amoun Underl Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
NICOLS JOHN J C/O CODEXIS, INC. 200 PENOBSCOT DRIVE REDWOOD CITY, CA 94063	Х		President and CEO					
Signatures								
/s/ Gordon Sangster, Attorney-i Nicols	r John J.	06/15/2016						
**Signature of Reporting		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)  $\frac{\text{Such shares were withheld by the Issuer on vesting of restricted stock to cover applicable withholding taxes and were not sold in the open market.}$

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.