Gingras Leo Gerard Form 4 July 27, 2011

# FORM 4

if no longer

subject to

Section 16.

Form 4 or

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average burden hours per response... 0.5

**OMB APPROVAL** 

3235-0287

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Last)

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person \* Gingras Leo Gerard

(Middle)

5. Relationship of Reporting Person(s) to Issuer

**OMB** 

Number:

Symbol

NUTRACEA [NTRZ]

(Check all applicable)

(First)

(Street)

(State)

3. Date of Earliest Transaction (Month/Day/Year)

07/15/2011

Director 10% Owner X\_ Officer (give title Other (specify

6. Individual or Joint/Group Filing(Check

6720 N SCOTTSDALE

below) Chief Operating Officer

ROAD, SUITE 390

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

(Instr. 4)

Person

below)

SCOTTSDALE, AZ 85253

(City) (Zip) 1.Title of 2. Transaction Date 2A. Deemed Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Security (Instr. 3) (Month/Day/Year)

Execution Date, if

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

Code V Amount (D) Price

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I)

(Instr. 4)

(A)

Reported Transaction(s)

(Instr. 3 and 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 Conversion Security or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year)

Execution Date, if any

4. 5. Number of TransactionDerivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

8.

D

S

#### Edgar Filing: Gingras Leo Gerard - Form 4

(Instr. 3)	Price of Derivative Security	Derivative		(Instr. 8)	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
Stock Options	\$ 0.2	07/15/2011		A	572,088		(1)	(2)	Common Stock	572,088

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Gingras Leo Gerard 6720 N SCOTTSDALE ROAD SUITE 390 SCOTTSDALE, AZ 85253

**Chief Operating Officer** 

## **Signatures**

Leo Gingras 07/27/2011

\*\*Signature of Person Date

Reporting Person

# **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) The options shall vest as follows: 1/12th of the options shall vest on the 15th day and the last day of the month for the next six (6) months, July through December 2011. The options shall be fully vested by 12/31/2011.
- The pptions shall expire as follows: 40% of the options shall expire one year (July 15, 2012) after the Grant Date; 30% of the options shall expire two years (July 15, 2013) after the Grant Date; and the final 30% shall expire three years (July 15, 2014) after the Grant Date.

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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