Edgar Filing: INTROGEN THERAPEUTICS INC - Form 4

INTROGEN THERAPEUTICS INC

Form 4

October 28, 2005

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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0.5

OMB APPROVAL

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See Instruction

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(b).

1. Name and Address of Reporting Person * **AVENTIS INC**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Issuer

Symbol

INTROGEN THERAPEUTICS INC

(Check all applicable)

[INGN]

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

Director 10% Owner __X__ Other (specify Officer (give title

(Zip)

300 SOMERSET CORPORATE

10/27/2005

below) below) 10% owner and beneficial owner

BLVD.,

(Street)

(State)

10/27/2005

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

Form filed by One Reporting Person _X_ Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

BRIDGEWATER, NJ 08807

(City)

Common

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

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

5. Amount of Securities Beneficially (D) or Indirect (I) Owned Following (Instr. 4)

Ι

6. Ownership 7. Nature of Form: Direct Indirect Beneficial Ownership (Instr. 4)

Reported (A)

Transaction(s) (Instr. 3 and 4)

Code V (D) Price Amount

S 63,000 D 5.03

2,120,648

SFN (1)

SEC 1474

(9-02)

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

(Month/Day/Year)

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

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9. Nu Deriv Secur Bene Own Follo Repo Trans

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Titl	e and	8. Price of	٥
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Da	ate Amoi		nt of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative Securities			Secur	ities	(Instr. 5)	J	
	Derivative							(Instr.	3 and 4)		(
	Security				Acquired]
	_				(A) or]
					Disposed						7
					of (D)						(
				(Instr. 3,							
					4, and 5)						
									A 4		
									Amount		
				D	Date E	Expiration	TC:41	or			
						Exercisable Date	Date	Title	Number		
				C 1 17	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

10% owner and beneficial owner

AVENTIS INC

300 SOMERSET CORPORATE BLVD. 10% owner and beneficial owner

BRIDGEWATER, NJ 08807

AVENTIS HOLDINGS INC

3711 KENNETT PIKE

SUITE 200

GREENVILLE, DE 19807

Signatures

Joseph F. Haggerty, Vice President 10/28/2005

**Signature of Reporting Person Date

Joseph M. Palladino,

President 10/28/2005

**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) Owned directly by Aventis Holdings Inc. and beneficially by Aventis Inc.

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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