Edgar Filing: CareDx, Inc. - Form 4

CareDx, Inc. Form 4 July 06, 2016	5							OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							-	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).										
(Print or Type F	Responses)									
1. Name and A Goldberg M	er Name and x, Inc. [CD		Гradin	g	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) C/O CAREI BAYSHOR	Earliest Transaction ay/Year) D16				X_ Director 10% Owner Officer (give title Other (specify below) below)					
	(Street)	ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
BRISBANE	, CA 94005						Form filed by M Person	More than One R	eporting	
(City)	(State)	(Zip) Tab	le I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any		3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price 6 405			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	07/01/2016		А	6,405 (1)	А	\$0	55,281	D		

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	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transact	5. ionNumber	6. Date Exercisable and Expiration Date		7. Title and Amount of		8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of	5		Underlying Securities (Instr. 3 and 4)		(Instr. 5)	Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Goldberg Michael C/O CAREDX, INC.

Signatures

BRISBANE, CA 94005

Reporting Owner Name / Address

3260 BAYSHORE BOULEVARD

/s/ Charles Constantin as attorney-in-fact for Michael Goldberg

**Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Director

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** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Relationships

10% Owner Officer Other

(1) Represents an automatic, quarterly grant of common stock to the reporting person in lieu of cash for non-employee director compensation pursuant to the issuer's Outside Director Compensation Policy.

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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07/06/2016

Date