## Edgar Filing: CareDx, Inc. - Form 4

CareDx, Inc Form 4 January 15, <b>FORN</b> Check th if no lon subject to Section Form 4 Form 5 obligation may com <i>See</i> Insta 1(b).	2015 <b>A 4</b> UNITED STAT united state UNITED STAT STATEMENT Section 17(a) of th 30(	ES SECURITIES Washington OF CHANGES IN SECU o Section 16(a) of t he Public Utility Ho h) of the Investmer	n, D.C. 20 N BENEFI RITIES the Securit	549 ICIAL O ies Excha 1pany Ac	WNERSHIP OF inge Act of 1934, t of 1935 or Secti	N OMB Number: Expires: Estimate burden h response	•	
(Print or Type	Responses)							
1. Name and A GAGNON	Address of Reporting Person NEIL	2. Issuer Name <b>a</b> Symbol CareDx, Inc. [C		Trading	5. Relationship o Issuer (Cho	of Reporting F eck all applica		
(Last) 1370 AVEI AMERICA	3. Date of Earliest (Month/Day/Year) 01/13/2015	Transaction		Director	DirectorX10% Owner Officer (give title Other (specify			
NEW YOR	(Street) RK, NY 10019	4. If Amendment, I Filed(Month/Day/Ye	-	I	6. Individual or Applicable Line) _X_ Form filed by Form filed by Person	One Reporting	Person	
(City)	(State) (Zip)	Table I - Non	-Derivative	Securities A	Acquired, Disposed	of, or Benefic	ially Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any		eemed 3. ion Date, if Transact Code n/Day/Year) (Instr. 8)	4. Securiti ior(A) or Dis (Instr. 3, 4	ies Acquire sposed of (I	d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	5. Amount of Securities6.BeneficiallyForm: Direct (D)OwnedDirect (D)Following Reportedor IndirectReported(I)Transaction(s)(Instr. 4)		
Common Stock	01/13/2015	Р	6,904		.2 632,691	I	By Managing Member as General Partner of Darwin Partnership	
Common Stock	01/13/2015	Р	66,115	A \$7	.2 698,806	I	By Managing Member as General Partner of	

#### Edgar Filing: CareDx, Inc. - Form 4

Common Stock	01/14/20	015	Р	4,662	A \$ 6.8	8 703,468	i I		Gagne Invest Assoc By Mana Meml Gener Partne Darw Partne	tment ciates ging ber as ral er of in	
Common Stock	01/14/20	015	Р	44,638	A \$ 6.8	8 748,106	) I		By Mana Meml Gener Partne Gagne Invest Assoc	ber as ral er of on tment	
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 Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transactic Code	5.	6. Date Exer Expiration D (Month/Day/ e	ate	7. Tit Amou Unde Secur (Instr	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
Repor	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

**Reporting Owner Name / Address** 

Relationships

Director 10% Owner Officer Other

GAGNON NEIL 1370 AVENUE OF THE AMERICAS 24TH FLOOR NEW YORK, NY 10019

## Signatures

/s/ Neil Gagnon

01/15/2015

<u>\*\*</u>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).

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. nter"> 952 \$ 07,612 D Restricted Stock Units ("RSUs") (2)09/15/2018 M 5,000 (5) (5) Class A Common Stock 5,000 \$ 0 50,000 D Restricted Stock Units ("RSUs") (2)09/15/2018 M 2,500 (6) (6) Class A Common Stock 2,500 \$ 0 35,000 D

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
1	Director	10% Owner	Officer	Other		
Macri Edmond C/O WAYFAIR INC., 4 COPLEY PLACE, 7TH FL BOSTON, MA 02116			Chief Product/Marketing			
Signatures						
/s/ Enrique Colbert, Attorney-in-fact for Edmond Macri	09/18	/2018				

\*\*Signature of 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) Represents the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of the RSUs listed in Table II and does not represent a discretionary trade by the reporting person.

Date

- (2) Each RSU represents a contingent right to receive one share of Class A Common Stock when vested.
- (3) These RSUs vest upon the satisfaction of a service condition. The service condition is satisfied as to 20% of the shares on March 15, 2016 and as to an additional 5% of the shares for each 3-month period of continuous service thereafter.
- (4) These RSUs vest upon the satisfaction of a service condition and have no expiration date. The service condition is satisfied as to 1/5th of the shares on September 15, 2016 and as to an additional 1/20th of the shares for every three months of continuous service thereafter.
- (5) These RSUs vest upon the satisfaction of a service condition and have no expiration date. The service condition is satisfied as to 1/5th of the shares on March 15, 2017 and as to an additional 1/20th of the shares for every three months of continuous service thereafter.

These RSUs vest upon the satisfaction of a service condition and an event condition and have no expiration date. The service condition is (6) satisfied as to 1/5th of the shares on March 15, 2018 and as to an additional 1/20th of the shares for every three months of continuous service thereafter.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

#### Edgar Filing: CareDx, Inc. - Form 4

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.