Edgar Filing: Golding Cornelius E - Form 4

Golding Co Form 4											
May 13, 20								OMB A	PPROVAL		
FORM	UNITED	STATES					COMMISSIO	N OMB	3235-0287		
Check t if no lor subject Section Form 4 Form 5	nger STATEN to STATEN 16. or		Washington, D.C. 20549 F CHANGES IN BENEFICIAL O SECURITIES					Estimated burden ho response	January 31, 2005 average urs per		
Form 5 obligations may continue. See Instruction 1(b). 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)											
(Thit of Type	(Kesponses)										
1. Name and Address of Reporting Person <u></u> Golding Cornelius E			2. Issuer Name and Ticker or Trading Symbol NEUROLOGIX INC/DE				5. Relationship of Reporting Person(s) to Issuer				
				OLOGIX K.OB]	INC/DE	,	(Check all applicable)				
(Last)				. Date of Earliest Transaction			X_ Director 10% Owner Officer (give title Other (specify				
C/O NEUR BRIDGE P	ROLOGIX, INC., PLAZA		(Month/) 05/11/2	Day/Year) 2010			below)	below)			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)			al	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
FORT LEE	E, NJ 07024						Form filed by Person	More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	ally Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution I any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Re	port on a separate line	e for each cla	iss of sec	urities bene	ficially ow	ned directly of	or indirectly.				
					inforr requi	nation cont red to respo ays a curre	spond to the colle ained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					sposed of, or convertible s	Beneficially Owner securities)	d			
1. Title of Derivative		saction Date			4. Transac	5. Numbe			7. Title and Amount of Underlying Securities		

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Security (Instr. 3)	or Exercise Price of Derivative Security	Price of Derivative		Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options to acquire Common Stock	\$ 0.65	05/11/2010		А	75,000		<u>(1)</u>	05/11/2020	Common Stock	75,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Golding Cornelius E C/O NEUROLOGIX, INC. ONE BRIDGE PLAZA FORT LEE, NJ 07024	Х						
Signatures							
/s/ Marc L. Panoff, Attorney-in-Fact		05/12/2010)				
**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) One-third of these options are exercisable on each of May 11, 2010, May 11, 2011 and May 11, 2012.
- (2) Options were acquired in connection with the reporting person's service as a director of Neurologix, 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.