Edgar Filing: GENENCOR INTERNATIONAL INC - Form 4

	20	gairiini	9. 0.1.1				0.0.1				
GENENCOF Form 4 April 22, 200	R INTERNATION	NAL INC	2								
FORM	1 4								OMB AF	PROVAL	
Washing					TIES AND EXCHANGE COMMISSION nington, D.C. 20549					3235-0287	
Check thi if no long subject to Section 1 Form 4 or Form 5	Ger STATEM 6. r		OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: Estimated a burden hour response		
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 F	Responses)										
BJERRE NIELSEN SOREN Symbol GENEN				er Name and Ticker or Trading NCOR INTERNATIONAL GCOR]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of				of Earliest Transaction /Day/Year) /2005				X_ Director 10% Owner Officer (give title Other (specify below) below)			
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
COPENHAGEN, G7 _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person											
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, if			Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	04/20/2005			Code V	Amount 2,025	(A) or (D)	Price \$	Transaction(s) (Instr. 3 and 4)	D		
Stock, \$.01 par value	04/20/2005			U <u>(1)</u>	(1)	D	19.25 (1)	0	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.

Edgar Filing: GENENCOR INTERNATIONAL INC - Form 4

 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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owne	Relationships					
FB		Director	10% Owner	Officer	Other	
BJERRE NIELSEN SC C/O DANISCO A/S LANGEBROGADE 1 COPENHAGEN, G7	Х					
Signatures						
Soren Bjerre-Nielsen	04/21/2005					
<u>**</u> Signature of	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).

On 1/27/05, Genencor International, Inc. (the "Company"), Danisco A/S ("Danisco") and DH Subsidiary Inc., an indirect wholly-owned subsidiary of Danisco ("Acquisition Sub") entered into an Acquisition Agreement providing for a cash tender offer to acquire all of the

(1) outstanding shares of common stock of the Company not otherwise owned by Danisco or its subsidiaries for \$19.25 per share, to be followed by a merger of Acquisition Sub with and into the Company, with the Company to continue as the surviving corporation. These shares were accepted in the closing of the tender offer on 4/20/05.

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.

Reporting Person