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

CDI

CareDx, Inc.												
Form 4												
October 05, 201	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										OMB APPROVAL		
	• UNITED S	TATES SI					NGE (	COMMISSION		3235-0287		
Check this bo	ox		Was	hington,	D.C. 205	549			Number:			
if no longer									Expires:	January 31, 2005		
subject to	subject to STATEMENT OF CHANG				SENEFT TIES	CIA	LOW	NERSHIP OF	Estimated a			
Section 16. Form 4 or		SE						burden hours per				
Form 5	Filed pure	uant to Sec	otion 16	(a) of the	Securiti	es Fr	chand	ge Act of 1934,	response	0.5		
obligations	Section 17(a)							f 1935 or Sectio	m			
may continue	<b>ð.</b>			vestment (	•	• •			11			
See Instruction 1(b).	on	50(11) 01	uie iii (	estinent .	compun.	, 1100	01 17					
(Print or Type Resp	oonses)											
				r Name <b>and</b> Ticker or Trading				•	f Reporting Per	Reporting Person(s) to		
SNYDERMAN RALPH Symbol								Issuer				
		С	areDx,	Inc. [CD]	NA]			(Cheo	ck all applicable	e)		
(Last)	(First) (M	iddle) 3.	Date of	Earliest Tra	insaction			× ×	11	,		
				h/Day/Year)				_X_Director10% Owner				
C/O CAREDX, INC., 3260 10/01/2			0/01/20	1/2015				Officer (give title     Other (specify       below)     below)				
BAYSHORE B	BOULEVARD								,			
				f Amendment, Date Original d(Month/Day/Year)				6. Individual or Joint/Group Filing(Check				
								Applicable Line)				
								_X_Form filed by One Reporting Person Form filed by More than One Reporting				
BRISBANE, C	A 94005							Person				
(City)	(State) (Z	Zip)	Table	I - Non-De	erivative S	lecuri	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned		
1.Title of 2.	. Transaction Date	24 Deeme		3.				5. Amount of	6. Ownership	-		
	Month/Day/Year)	Execution I			3. 4. Securities TransactionAcquired (A) or			Securities	Form: Direct	Indirect		
(Instr. 3) any				Code Disposed of (D)				Beneficially	(D) or	Beneficial		
(Month/Day/Year)				r) (Instr. 8) (Instr. 3, 4 and 5)				Owned	Indirect (I)	Ownership		
								Following Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Common	0/01/2015				1,739			19.024	D			
Stock	0/01/2015			А	(1)	А	\$0	18,934	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 Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
SNYDERMAN RALPH C/O CAREDX, INC. 3260 BAYSHORE BOULEVARD BRISBANE, CA 94005	Х							
Signatures								
/s/ Ken Ludlum as attorney-in fact fo Snyderman		10/05/2015						
<b>**</b> Signature of Reporting Perso	n			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) 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.