Edgar Filing: CareDx, Inc. - Form 4

CareDx, Ind Form 4 April 25, 20 FORN Check t if no lor subject Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	17 A 4 UNITED his box his box to STATEN 16. or Filed pu Section 17	MENT OF rsuant to S (a) of the F	Wa F CHAI Section Public U	ashington, NGES IN SECUR 16(a) of the	D.C. 20 BENEF ITIES e Securi ling Cor	ICIAL O' ties Excha npany Act	E COMMISSIO WNERSHIP OI nge Act of 1934 of 1935 or Section 940	N OMB Number: Expires: Estimated burden hou response	urs per	
(Print or Type	Responses)									
1. Name and Bell Micha	Person <u>*</u>	2. Issuer Name and Ticker or Trading Symbol CareDx, Inc. [CDNA]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) C/O CARE BAYSHOI	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/21/2017				Director 10% Owner X_ Officer (give title Other (specify below) below) Chief Financial Officer				
BRISBAN	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year) BRISBANE, CA 94005					ıl	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
(City)	(State)	(Zip)	Tal	la I Non D	arivativa	Securities A	Person Acquired, Disposed	of on Donoficio	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any	ed Date, if	3. Transaction Code	4. Securit Acquired Disposed (Instr. 3, 4	ies (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	
Reminder: Re	port on a separate lin	e for each cla	ass of sec	urities benef:	Perso inform requir	ns who res nation cont red to resp nys a curre	or indirectly. spond to the colle tained in this forr ond unless the fo ntly valid OMB co	n are not orm	SEC 1474 (9-02)	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	,	Acquired (or Dispose (D) (Instr. 3, 4 and 5)	ed of				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 1	04/21/2017		A		40,000		<u>(1)</u>	04/21/2027	Common Stock	40,000
Ronart	tina Ow	nore									

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Reporting Owner Name / Address	Relationships						
1	Director	10% Owner	Officer	Other			
Bell Michael Brian C/O CAREDX, INC. 3260 BAYSHORE BOULEVARD BRISBANE, CA 94005			Chief Financial Officer				
Signatures							

/s/ Michael Bell 04/25/2017

<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).
- 1/4th of the shares subject to the option shall vest on April 21, 2018 and 1/48th of the shares subject to the option shall vest monthly (1) thereafter.

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.