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Vac Iamas D

Yee James I)										
Form 4											
December 0	8, 2017										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
	UNITED	Washington, D.C. 20549								3235-0287	
Check th if no lon	ger								Expires:	January 31,	
subject t	MENT OF	F CHANGES IN BENEFICIAL OWNERSHIP					ERSHIP OF	Estimated a	2005 Iverage		
Section 16.				SECURITIES					burden hours per		
Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of						A . C1024	response	0.5			
obligatio	-						-				
may con	lunue.			•	t Compan	· ·	•	1935 or Section	L		
<i>See</i> Instr 1(b).	ruction	50(II) C	n uie m	ivestinen.	Compan	ly AC	1 01 1940)			
1(0).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person							son(s) to				
V. L D			2. Issuel Symbol	2. Issuer Name and Ticker or Trading				Issuer			
			CareDx, Inc. [CDNA]								
(Last)						(Check all applicable)					
			3. Date of Earliest Transaction (Month/Day/Year)					Director 10% Owner			
			12/08/2017					X Officer (give title Other (specify			
BAYSHORE BOULEVARD			12,00,2017					below) below) Chief Medical Officer			
	(Street)	,	4 If Ame	ondment D	ate Origina	1					
				. If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
X Form f					_X_ Form filed by O	by One Reporting Person					
BRISBANI	E, CA 94005							Form filed by Me Person	ore than One Re	porting	
(City)	(State)	(Zip)	Tabl	la I Nan I	Domination	Second		ired, Disposed of,	on Donoficial	ly Ormad	
							-	· • ·		•	
1.Title of Security	2. Transaction Date (Month/Day/Year)	Execution I		3. Transactio				5. Amount of Securities	6. Ownership	 Nature of Indirect 	
(Instr. 3)	(infolial Day, I cal)	any	Dute, II	f Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				Beneficially	Form:	Beneficial	
		(Month/Day	y/Year)	(Instr. 8)				Owned	Direct (D)	Ownership	
								Following Reported	or Indirect (I)	(Instr. 4)	
						(A)		Transaction(s)	(Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	12/08/2017			М		٨	\$	74 705	D		
Stock	12/06/2017			111	29,197	A	3.3565	74,795	D		
Common	10/00/0017			a	00.107	P	• -		D		
Stock	12/08/2017			S	29,197	D	\$7	45,598	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 3.3565	12/08/2017		М	29,197	<u>(1)</u>	01/01/2018	Common Stock	29,197

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Yee James P C/O CAREDX, INC. 3260 BAYSHORE BOULEVARD BRISBANE, CA 94005			Chief Medical Officer				
Signatures							
/s/ Peter Maag as attorney-in-fact fo Ph.D.	r James P	. Yee	12/08/2017				
<u>**</u> Signature of Reporting Person	on		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) The shares subject to the option vested monthly over a four year period commencing January 1, 2008 and became fully vested on January 1, 2012.

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.