## Edgar Filing: SIMPSON TODD E - Form 4

Form 4												
March 06, 20 FORM Check this	<b>4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549										OMB APPROVAL OMB 3235-028 Number: January 31	
if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru 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 20(h) of the Investment Company Act of 1940								Expires: 2005 Estimated average burden hours per response 0.5			
(Print or Type R	esponses)											
SIMPSON TODD E Symbol				r Name <b>and</b> Ticker or Trading LE GENETICS INC /WA ]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
21823 30TH DRIVE SE (Month/D 03/04/20 (Street) 4. If Amer				e of Earliest Transaction h/Day/Year) 4/2019					Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
			nendment, Date Original Ionth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
BOTHELL,	WA 98021								Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio		3. Transact Code (Instr. 8)	tior )	4. Securiti (A) or Dis (D) (Instr. 3, 4)	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/04/2019			S <u>(1)</u>		10,000	D		184,280 <u>(2)</u>	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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	Date	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative		-		Securities	5		(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
	5				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
					,, und 0)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
						Exercisable			of		
				Code V	(A) (D)				Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships								
	Director	10% Owner	Officer	Other					
SIMPSON TODD E 21823 30TH DRIVE SE BOTHELL, WA 98021			Chief Financial Officer						
Signatures									
By: /s/ Jean Liu For: Todd E. SImpson									
<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).
- The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan. (1)
- Amount of securities beneficially owned following reported transactions includes restricted stock units subject to vesting and 359 shares (2) acquired under the Amended and Restated 2000 Employee Stock Purchase Plan on January 31, 2019.

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.