Edgar Filing: GenMark Diagnostics, Inc. - Form 4

GenMark Diagnostics, Inc.

Form 4	5 2012										
September (_								OMB	APPROVAL	
FORM	UNITED	STATES		RITIES A shington,			NGE	COMMISSION	N OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 17(a) of the 1 30(h)			ection 1 ublic U	SECUR 6(a) of the	ITIES e Securit ling Cor	ties E	xchan y Act o	Estima burde respon ge Act of 1934, of 1935 or Section		January 31, 2005 I average burs per 0.5	
1(b).	action				•	•					
Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Kayyem Jon Faiz			2. Issuer Name and Ticker or Trading Symbol GenMark Diagnostics, Inc. [GNMK]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(Che				ck all applicable)						
5964 LA PLACE COURT			(Month/Day/Year) 09/03/2013					Director X Officer (giv below) SVP, Res		0% Owner ther (specify lopment	
	(Street)			endment, Da nth/Day/Year	-	1		6. Individual or Applicable Line) _X_ Form filed by	One Reporting	Person	
CARLSBA	D, CA 92008							Form filed by Person	More than One	Reporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Ac	quired, Disposed	of, or Benefici	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	n(A) or D (D) (Instr. 3,	spose	d 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/03/2013			S <u>(1)</u>	1,545	D	\$ 11.6	106,806	D		
Common Stock								61,651	I	HI Charitable Remainder Uni Trust (2)	
Common Stock								112,934	Ι	The Jon Faiz	

Stock

Kayyem and Paige N.

Gates Family

	0 0	0 /								
				Ap	ust, dated pril 1, 00 (2)					
Common Stock			719,308	I IF	IN LP (2)					
Reminder: Report on a separate line for e	ach class of securities bene	Persons who re information co required to res	y or indirectly. espond to the colle ntained in this form pond unless the fo ently valid OMB co	are not rm	C 1474 (9-02)					
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 Derivative Conversion (Month/Day/) Security or Exercise (Instr. 3) Price of Derivative Security	n Date 3A. Deemed Year) Execution Date, if any (Month/Day/Year)	4. 5. TransactionNumber Code of (Instr. 8) Derivativ Securitie Acquirec (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) ve s i	and 7. Title and Amount of Underlying Securities (Instr. 3 and	8. Price of Derivative Security (Instr. 5)4)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr				
		Code V (A) (D)	Date Expira Exercisable Date	Amou or Title Numl of Share	ber					
Reporting Owners										

Reporting Owner Name / Address	Relationships						
L O	Director	10% Owner	Officer	Other			
Kayyem Jon Faiz 5964 LA PLACE COURT CARLSBAD, CA 92008			SVP, Research & Development				
Signatures							
Eric Stier, Attorney-in-fact	09/05/20	13					

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** 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 were sold at the election of the Reporting Person solely to satisfy tax withholding obligations in connection with the partial vesting of previously granted restricted stock awards.

Dr. Kayyem is the trustee of the HI Charitable Remainder Uni Trust, trustee of The Jon Faiz Kayyem and Paige N. Gates Family Trust,
(2) dated April 1, 2000 and the President of In-Motion LLC, the general partner of IFIN LP. Dr. Kayyem disclaims beneficial ownership of these securities, except to the extent of any indirect pecuniary interest in his distributive shares therein.

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.