## Edgar Filing: ChromaDex Corp. - Form 4

| ChromaDex C<br>Form 4<br>July 07, 2015  | orp.  |   |  |  |   |   |  |  |                           |   |                              |                       |
|---|---|---|--|--|---|---|--|--|---------------------------|---|------------------------------|-----------------------|
| •   | Л   |   |  |  |   |   |  |  |                           | OMB A   | PPROVA                       | ۹L                    |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549  |   |   |  |  |   |   |  |  | N                         | OMB<br>Number:  | 3235-                        | -0287                 |
| Check this<br>if no longer<br>subject to<br>Section 16.<br>Form 4 or<br>Form 5<br>obligations<br>may contin<br><i>See</i> Instruct<br>1(b). | Filed pur<br>Section 17(                      | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF<br>SECURITIES<br>Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,<br>Section 17(a) of the Public Utility Holding Company Act of 1935 or Section<br>30(h) of the Investment Company Act of 1940 |  |  |   |   |  |  |                           |   | Januai<br>average<br>urs per | ry 31,<br>2005<br>0.5 |
| (Print or Type Re   | sponses)                                      |   |  |  |   |   |  |  |                           |   |                              |                       |
| 1. Name and Address of Reporting Person <u>*</u><br>HALPRYN GLENN L   |   |   | 2. Issuer Name <b>and</b> Ticker or Trading<br>Symbol<br>ChromaDex Corp. [CDXC.OB] |  |   |   |  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                                      |                           |   |                              |                       |
| (Last) (First) (Middle)   |   |   | 3. Date of Earliest Transaction  |  |   |   | (Check an applicable)  |  |                           |   |                              |                       |
| 10005 MUIRLANDS<br>BLVD., SUITE G   |   |   | (Month/Day/Year)<br>07/06/2015   |  |   |   | Director     10% Owner       Officer (give title     Other (specify below) |  |                           |   |                              |                       |
| (Street)<br>IRVINE, CA 92618  |   |   | 4. If Amendment, Date Original Filed(Month/Day/Year)                               |  |   | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting<br/>Person</li> </ul> |  |  |                           |   |                              |                       |
| (City)  | (State)                                       | (Zip)   | Tab  | la T. Nam I                                      |   | C   |  |  | e.                        |   | II O                         | 3                     |
| 1.Title of 2.   | (June)<br>Transaction Date<br>Month/Day/Year) |   | ed<br>Date, if   | 3.<br>Transactio<br>Code<br>(Instr. 8)<br>Code V | 4. Secu<br>nAcquin<br>Dispos<br>(Instr. | urities<br>red (A)<br>sed of (<br>3, 4 an<br>(A<br>or   | or<br>D)<br>d 5)   | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4) | 6. (<br>For<br>(D)<br>(I) | or Beneficia<br>Ownership<br>rm: Direct<br>) or Indirect<br>str. 4) | 7. Nature<br>Indirect        | e of<br>al<br>iip     |
| Reminder: Repor   | t on a separate line                          | e for each cl   | ass of sec   | urities bene                                     | Per<br>info<br>req<br>dis               | rsons<br>ormati<br>juired   | who res<br>on cont<br>to resp  | or indirectly.<br>spond to the coll-<br>tained in this form<br>ond unless the for<br>ntly valid OMB co             | m ar<br>orm               | re not  | SEC 1474<br>(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  |
|-------------|-------------|---------------------|--------------------|------------|--------------|-------------------------|----------------------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | orDerivative | Expiration Date         | Underlying Securitie |
| Security    | or Exercise |                     | any                | Code       | Securities   | (Month/Day/Year)        | (Instr. 3 and 4)     |

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| (Instr. 3)  | Price of<br>Derivative<br>Security |            | (Month/Day/Year) | (Instr. | 8) | Acquired<br>or Dispose<br>(D)<br>(Instr. 3, 4<br>and 5) | ed of |                       |                    |                 |                              |
|---|------------------------------------|------------|------------------|---------|----|---|-------|-----------------------|--------------------|-----------------|------------------------------|
|   |                                    |            |                  | Code    | v  | (A)   | (D)   | Date Exercisable      | Expiration<br>Date | Title           | Amou<br>or<br>Numb<br>of Sha |
| Employee<br>Stock<br>Options<br>(right to<br>buy) | \$ 1.22                            | 07/06/2015 |                  | A       |    | 75,000  |       | 08/06/2015 <u>(1)</u> | 07/06/2025         | Common<br>Stock | 75,0                         |

## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>                                   |          |           |         |       |
|---|----------|-----------|---------|-------|
|   | Director | 10% Owner | Officer | Other |
| HALPRYN GLENN L<br>10005 MUIRLANDS BLVD.<br>SUITE G<br>IRVINE, CA 92618 |          |           |         |       |
| Signatures  |          |           |         |       |

/s/ Glenn Halpryn 07/07/2015

<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) Options vest 1/12th every month for 12 months and will be fully vested on July 6, 2016.
- (2) The total includes 264,309 options under different terms.

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.