AMYRIS, INC. Form 4 April 05, 2016

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 

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**OMB APPROVAL** 

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obligations may continue. See Instruction

**SECURITIES** 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * Melo John |                         |  | 2. Issuer Name and Ticker or Trading Symbol AMYRIS, INC. [AMRS] | 5. Relationship of Reporting Person(s) to Issuer               |  |  |
|---|-------------------------|--|---|--|--|--|
| (Last)  | (Last) (First) (Middle) |  | 3. Date of Earliest Transaction                                 | (Check all applicable)   |  |  |
|   |                         |  | (Month/Day/Year)  | X Director 10% Owner   |  |  |
| C/O AMYRIS, INC., 5885 HOLLIS<br>STREET, SUITE 100  |                         |  | 04/01/2016  | X Officer (give title Other (specify below)  President and CEO |  |  |
| ,   |                         |  |   | President and CEO  |  |  |
|   | (Street)                |  | 4. If Amendment, Date Original                                  | 6. Individual or Joint/Group Filing(Check                      |  |  |
|   |                         |  | Filed(Month/Day/Year)   | Applicable Line) _X_ Form filed by One Reporting Person        |  |  |
| EMERYVILLE, CA 94608                                |                         |  |   | Form filed by More than One Reporting Person                   |  |  |

#### EMERY VILLE, CA 94608

| (City)              | (State) (  | Zip) Table              | e I - Non-D  | erivative S       | Securi   | ties Acq      | uired, Disposed o  | f, or Beneficial           | ly Owned                              |
|---------------------|--|-------------------------|--|-------------------|----------|---------------|--|----------------------------|---------------------------------------|
| 1.Title of Security | 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if |                         | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) |                   |          |               | 5. Amount of Securities Form: Direct Indirect Beneficially (D) or Beneficial |                            |                                       |
| (Instr. 3)          |  | any<br>(Month/Day/Year) | Code (Instr. 8)  | (msu. 3,          | (A)      | ))            | Owned Following Reported Transaction(s)                                      | Indirect (I)<br>(Instr. 4) | Beneficial<br>Ownership<br>(Instr. 4) |
| Common<br>Stock     | 04/01/2016   |                         | Code V<br>F  | Amount 29,938 (1) | (D)<br>D | Price \$ 1.09 | (Instr. 3 and 4)<br>974,728  | D                          |                                       |
| Common<br>Stock     | 04/01/2016   |                         | F  | 37,580<br>(2)     | D        | \$<br>1.09    | 937,148  | 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 | 2.          | 3. Transaction Date | 3A. Deemed         | 4.         | 5.         | 6. Date Exerc | cisable and | 7. Title  | and          | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------|-------------|-----------|--------------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transactio | onNumber   | Expiration D  | ate         | Amoun     | t of         | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/   | Year)       | Underly   | ying         | Security    | Secui  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e             |             | Securit   | ies          | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |               |             | (Instr. 3 | 3 and 4)     |             | Own    |
|             | Security    |                     |                    |            | Acquired   |               |             |           |              |             | Follo  |
|             | •           |                     |                    |            | (A) or     |               |             |           |              |             | Repo   |
|             |             |                     |                    |            | Disposed   |               |             |           |              |             | Trans  |
|             |             |                     |                    |            | of (D)     |               |             |           |              |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |               |             |           |              |             |        |
|             |             |                     |                    |            | 4, and 5)  |               |             |           |              |             |        |
|             |             |                     |                    |            |            |               |             |           | A manuat     |             |        |
|             |             |                     |                    |            |            |               |             |           | Amount       |             |        |
|             |             |                     |                    |            |            | Date          | Expiration  |           | Or<br>Number |             |        |
|             |             |                     |                    |            |            | Exercisable   | Date        |           | Number       |             |        |
|             |             |                     |                    | C + V      | (A) (D)    |               |             |           | of           |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |               |             |           | Shares       |             |        |

## **Reporting Owners**

| Reporting Owner Name / Address                    | Relationships |           |                   |       |  |  |  |
|---|---------------|-----------|-------------------|-------|--|--|--|
| <b>.</b>  | Director      | 10% Owner | Officer           | Other |  |  |  |
| Melo John   |               |           |                   |       |  |  |  |
| C/O AMYRIS, INC.<br>5885 HOLLIS STREET, SUITE 100 | X             |           | President and CEO |       |  |  |  |
| EMERYVILLE, CA 94608                              |               |           |                   |       |  |  |  |

# **Signatures**

/s/ John Melo by Nicholas Khadder, 04/05/2016 Attorney-in-Fact

> \*\*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).
- Shares withheld to satisfy the Reporting Person's tax withholding obligation upon settlement of restricted stock units (RSUs) under RSU **(1)** award granted on June 3, 2013.
- Shares withheld to satisfy the Reporting Person's tax withholding obligation upon settlement of restricted stock units (RSUs) under RSU award granted on May 5, 2014.

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.

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