## Edgar Filing: NEUROLOGIX INC/DE - Form 4

NEUROLO Form 4	GIX INC/DE									
May 11, 200	07									
FORM		CT A TEC	SECU	DITIES /				л	PPROVAL	
	SIAIES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					Number:	3235-0287		
Check th if no lon	iger STATEN	AENT OI	F CHANGES IN BENEFICIAL OWNERSHIP OF					Expires:	January 31, 2005	
subject t Section Form 4 o Form 5		SECURITIES					Estimated burden hor response	urs per		
obligation may con <i>See</i> Instr 1(b).	Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940					on				
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> Jeffrey Reich			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
			NEUROLOGIX INC/DE [NRGX.OB]				(Check all applicable)			
(Last)	(First) (A	Middle)		of Earliest T	ransaction		X Director Officer (giv		% Owner her (specify	
NEUROLO BRIDGE P	OGIX, INC., ONE LAZA		(Month/) 05/09/2	Day/Year) 2007			below)	below)	ior (specify	
	4. If Amendment, Date Original Filed(Month/Day/Year)			ป	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
FORT LEE	E, NJ 07024							More than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed o	of, or Beneficia	ally Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	port on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly o	or indirectly.			
					inforn requi	nation cont red to respo ays a currer	spond to the colle- ained in this form ond unless the for ntly valid OMB co	are not rm	SEC 1474 (9-02)	
	Tab					posed of, or convertible s	Beneficially Owned securities)	I		
		saction Date /Day/Year)			4. Transact	5. Number iorDerivative			7. Title and Amount of Underlying Securities	

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options to acquire common stock	\$ 1.15	05/09/2007		A	30,000		(2)	05/09/2017	Common Stock	30,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting of the reader that the	Director	10% Owner	Officer	Other			
Jeffrey Reich NEUROLOGIX, INC. ONE BRIDGE PLAZA FORT LEE, NJ 07024	X						
Signatures							
/s/ Marc L. Panoff (Attorney in Fact)		05/11/200	)7				
**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 were acquired in connection with the reporting person's service as a director of Neurologix, Inc.
- (2) One third of these options are exercisable on each of May 9, 2007, May 9, 2008 and May 9, 2009.

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.