GenMark Diagnostics, Inc. Form 4

December 10, 2015

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * MASSARANY HANY				2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			Genivia	GenMark Diagnostics, Inc. [GNMK]					(Check all applicable)				
	(Last)	(First) (I	Middle)		f Earliest Tr	ransaction							
5964 LA PLACE COURT			(Month/Day/Year) 12/08/2015					_X_ Director 10% Owner _X_ Officer (give title Other (specify below) 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 _ Form filed by More than One Reporting				
	CARLSBAI	O, CA 92008							Person				
	(City)	(State)	Table I - Non-Derivative Securities Acc					equired, Disposed of, or Beneficially Owned					
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med n Date, if Day/Year)	3. Transactic Code (Instr. 8)	on(A) or Do (D) (Instr. 3,	4 and (A) or	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	12/08/2015			S(1)	1,735	D	\$ 7.26	79,557 (2)	D			
	Common Stock								405,911 <u>(2)</u>	I	Massarany Family Trust dated November 15, 2012 (3)		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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. Tit.	le and	8. Price of	9
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	tionNumber	Expiration D	ate	Amou	int of	Derivative	J
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	,
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative	e		Secur	ities	(Instr. 5)]
	Derivative				Securities			(Instr.	3 and 4)		(
	Security				Acquired]
					(A) or]
					Disposed						-
					of (D)						(
					(Instr. 3,						
					4, and 5)						
									Amount		
									or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code	V (A) (D)				Shares		
					() ()						

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
MASSARANY HANY 5964 LA PLACE COURT CARLSBAD, CA 92008	X		President and CEO					

Signatures

/s/ Eric Stier, 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).
- (1) The shares were sold pursuant to pre-established trading instructions solely to satisfy tax withholding obligations in connection with the partial vesting of previously granted restricted stock units.
- (2) The reporting person transferred 1,390 shares of the Issuer's common stock into the Massarany Family Trust dated November 15, 2012 in connection with the applicable restricted stock units vesting event.
- (3) Mr. Massarany is the trustee of the Massarany Family Trust and may be deemed to have beneficial ownership of these securities, 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.

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