SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Section 16.	box if no longer subject to Form 4 or Form 5 may continue. <i>See</i> 1(b).
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL										
OMB Number:	3235-0287									
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	tion 1(b).										mpany Act			, 04						
1. Name and Address of Reporting Person* <u>KIRK RANDAL J</u>					2. Issuer Name and Ticker or Trading Symbol HISTOGENICS CORP [HSGX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner						
	(Fi RD SECUF OVE AVEN	RITY, LLC	Middle)				of Earliest Transaction (Month/Day/Year) 2019								- Officer (give title Other (specify below) below)					
						If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) RADFO			24141		_								Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(St	ate) (Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)			2. Transa Date (Month/D		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					nd Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount		(A) or (D)	Price	Trans	action(s) 3 and 4)			(Instr. 4)		
Common Stock			01/11/2019					s		251,800		D	\$ <u>0</u> .	17 2,4	2,438,770		I	by Intrexon ⁽¹⁾		
Common Stock			01/14/2019					s		400,507		D	\$ <mark>0</mark> .	16 2,0	2,038,263		I	by Intrexon ⁽¹⁾		
Common Stock			01/15/2019					S		345,897		D	\$ <mark>0</mark> .	15 1,6	1,692,366		Ι	by Intrexon ⁽¹⁾		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Executio if any (Month/I			Transaction Code (Instr.		5. Number of		Exerci on Da Day/Yo	te A ear) S U D S		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nu of	ımber						
1. Name and Address of Reporting Person [*] KIRK RANDAL J																				
	RD SECUF OVE AVEN		(Mic	ddle)																
(Street) RADFO	RD	VA	241	141																

1. Name and Address of Reporting Person^*

(State)

(Zip)

(Zip)

INTREXON CORP

(City)

(City)

(Last) (First) (Middle) C/O LEGAL DEPARTMENT 20374 SENECA MEADOWS PARKWAY (Street) GERMANTOWN MD 20876

(State)

Explanation of Responses:

1. Randal J. Kirk, directly and through certain affiliates, is the largest shareholder of Intrexon Corporation ("Intrexon") and serves as Intrexon's Chairman of the Board and Chief Executive Officer. Mr. Kirk may therefore be deemed to have voting and dispositive power over the shares of the issuer owned by Intrexon. Shares held by Intrexon may be deemed to be indirectly beneficially owned (as defined under Rule 13d-3 promulgated under the Securities Exchange Act of 1934, as amended) by Mr. Kirk. Mr. Kirk disclaims beneficial ownership of such shares, except to the extent of any pecuniary interest therein.

<u>/s/ Randal J. Kirk</u> /s/ Randal J. Kirk, CEO of

Intrexon Corporation

<u>01/15/2019</u> 01/15/2019

Date

** Signature of Reporting Person

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

* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.