FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name at									_					
Name and Address of Reporting Person * Lalonde James			2. Issuer Name and Ticker or Trading Symbol CODEXIS INC [CDXS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director10% Owner							
(Last) (First) (Middle) C/O CODEXIS, INC., 200 PENOBSCOT DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 05/10/2015				X Officer (give title below) Other (specify below) SVP, R&D							
(Street) REDWOOD CITY, CA 94063			4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person							
(City		(State)	(Zip)	T.			G 14							
									- 	nired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)		Date	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, in any (Month/Day/Year	Code (Instr. 8)	(A)	4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		Beneficia Reported	nt of Securities ally Owned Following Transaction(s)		Ownership Form:	Beneficial	
					Code	V Am	ount (A) or	r Price	(Instr. 3 a	nd 4)		\ /	Ownership (Instr. 4)	
Commoi	n Stock		05/10/2015		F(1)		153 D	\$ 4.26	150 786			D		
						containe	d in this to	orm ar	re not requ	tired to res	snond unle			
				Derivative Securit	-	the form	displays a	a curre	ently valid	OMB con	trol number			
1. Title of	12	3 Transaction	(e.g., puts, calls, w	arrants, o	the form ed, Dispos ptions, con	displays and of	a curre eneficia curities	ently valid ally Owned	OMB con	trol number		11 Natur	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	3A. Deemed Execution Da any	e.g., puts, calls, wa 4. Transaction Code (ear) (Instr. 8)	arrants, o	ed, Dispositions, con 6. Date E and Expi (Month/I	displays a	eneficia curities 7. An Un Sec	ently valid	8. Price of		f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	Beneficia Ownersh (Instr. 4)	

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Lalonde James C/O CODEXIS, INC. 200 PENOBSCOT DRIVE REDWOOD CITY, CA 94063			SVP, R&D			

Signatures

/s/ Doug Sheehy, Attorney-in-Fact for James Lalonde	05/12/2015	
**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) Shares withheld by the Issuer on vesting of restricted stock units solely to cover applicable withholding taxes. No shares were sold in the open market; the transaction reported herein was executed automatically upon the vesting of the Reporting Person's restricted stock units.

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.