## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person* WOLF DENNIS P						2. Issuer Name and Ticker or Trading Symbol CODEXIS INC [CDXS]							:	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director 10% Owner					
(Last) (First) (Middle) C/O CODEXIS, INC., 200 PENOBSCOT DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 06/26/2018								Office	er (give title belo	ow)	Other (specify	below)		
(Street) REDWOOD CITY, CA 94063				4. If	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)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned														
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execu any	Deemed cution Date, if nth/Day/Year)		Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)				Benefici	nt of Securities lly Owned Following Transaction(s)		6. Ownership Form: Direct (D)	of Ir Ben	7. Nature of Indirect Beneficial Ownership	
						Monuil Day/Tear)		Code	V	Amoun	(A) or (D)	Pr	rice	(Insu. 5 and 4)			or Indirect (I) (Instr. 4)		str. 4)
Common Stock		06/26/2018				S	S <sup>(1)</sup>		9,000	D	\$ 14.4678 (2)		3 104,230			D			
Reminder:	Report on a s	separate line	for each		Deriv	ative Secu	rities	Acqu	Pe co th	ersons wontained e form d	ho res in this isplay	forms a cu	n are urren ficiall	not requ itly valid	ction of inf uired to res OMB cont	spond unle	ss	1474	4 (9-02)
1. Title of	2.	3. Transaction	on	3A. Deemed		outs, calls,	<b>warra</b> 5.	ints,		Date Exe				tle and	8. Price of	9. Number	of 10.	1	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative Security	Date		Year) Execution D	rte, if Transaction Code Year) (Instr. 8)		n Nu of Der Sec Acc (A) Dis of (	Number		and Expiration Date Month/Day/Year)		te	Amo Unde Secu	unt of erlying	Derivative Security (Instr. 5)		Owners Form o Derivat Securit Direct ( or India	ship of Heive (CD) rect	of Indirect Beneficia Ownersh (Instr. 4)
						Code V	/ (A	) (I	E	ate xercisable	Expir Date	ration	Title	Amount or Number of Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WOLF DENNIS P C/O CODEXIS, INC. 200 PENOBSCOT DRIVE REDWOOD CITY, CA 94063	X						

#### **Signatures**

/s/ Richard Sabalot, Attorney-in-Fact for Dennis Wolf	06/28/2018
**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) Transaction made pursuant to a 10b5-1 trading plan adopted by the Reporting Person on December 6, 2017.
  - This transaction was executed in multiple trades in prices ranging from \$14.25 to \$14.80, inclusive. The price reported in Column 4 above reflects the weighted average sale
- (2) price. The Reporting Person hereby undertakes to provide to the Securities and Exchange Commission staff, the Issuer, or a security holder of the Issuer, upon request, full information regarding the number of shares sold at each respective price within the range set forth in this footnote.

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.