FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

9	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)

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

					T		31. 33(11)					J. 2040							
1. Name and Address of Reporting Person*  Farabaugh Brett					2. Issuer Name and Ticker or Trading Symbol TRANSENTERIX, INC. [ TRXC ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>ralaval</u>	<u>ugii brei</u>	<u>.L</u>							<u> </u>	-	-			Direc			10% Ow		
-					-									X Office below	er (give title		Other (s below)	pecify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)								bciov	,	Interim CFO			
635 DAVIS DRIVE				101	01/02/2020								mermi Cro						
SUITE 3	00																		
					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6.	6. Individual or Joint/Group Filing (Check Applicable					
(Street)									-				Lit	ie)		_			
-	SVILLE I	NC	27560											X Form	filed by One	e Repo	rting Person	ا ا	
					_									Form Pers		e than	One Report	ting	
(City)	(	State)	(Zip)											Felsi	/I I				
(City)		State)	(Zip)																
		Tab	le I - Nor	n-Deriv	vativ	e Se	curities	s Ac	quired, C	Disp	osed o	f, or Be	neficia	lly Owne	d				
1. Title of S	Security (In	str. 3)		2. Trans	saction		3. 4. Securities Acquired (A)									7. Nature			
Date (Month/Da				/Day/Ye	ay/Year) Execution Date, if any (Month/Day/Yea			Code (Instr. 5)			str. 3, 4 an	d Securi Benefi				of Indirect Beneficial			
												Owned Following Reported		(I) (Instr. 4)	Ownership (Instr. 4)				
									Code	,	Amount	(A) o	r Price	Transa	tion(s)			,	
										"" (D)   '		(instr.	and 4)						
		-	Table II -											y Owned					
				(e.g., p	puts,	calls	s, warra	ants	, options	s, co	onverti	ble secu	ırities)						
1. Title of	2.	3. Transaction	3A. Deemed		4.		5. Numb	oer	6. Date Exercisab								10.	11. Nature	
Derivative Security	Conversion or Exercise		Execution Date, if any		Transaction Code (Instr.				Expiration Date of Securities (Month/Day/Year) Underlying				Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial		
(Instr. 3) Price of (Month/Day/Year) 8				8)	) Securities Derivative Sec						Security	(Instr. 5)	Beneficially		Direct (D) Owr	Ownership			
Derivative Security						Acquired (Instr. 3 and 4)						nd 4)		Owned Following		,	(Instr. 4)		
						Disposed									Reported	Reported			
						of (D) (Instr. 3, 4 and 5)								Transaction (Instr. 4)	on(s)				
										Amoun	┪								
													or	1					
									Date	E	xpiration		Number of						
					Code	٧	(A)	(D)	Exercisable	D	ate	Title	Shares						
Restricted	±0.00(1)	04 /02 /2022					20,000		(2)		(2)	Common	20.000		20.00				
Stock Units	\$0.00 <sup>(1)</sup>	01/02/2020			A		30,000		(2)		(2)	Stock	30,000	\$0.00	30,00	٠	D		

## **Explanation of Responses:**

- 1. Each restricted stock unit represents the right to receive one share of the Registrant's common stock.
- 2. Forfeiture restrictions will lapse on the restricted stock units ninety days following the earlier of (a) April 30, 2020, and (b) if the Reporting Person's employment is continued, the date on which the Reporting Person's continued employment begins. If the Reporting Person ceases to be employed with the Registrant prior to April 30, 2020, the restricted stock units will be forfeited.

## Remarks:

/s/Joshua Weingard, as Attorney-in-Fact for Brett

02/06/2020

**Farabaugh** 

\*\* Signature of Reporting Person

Date

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.