Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| washington, D.C. 20549 | |
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| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
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| OMB APP | ROVAL | | | | | | |
|--------------------------|-------|--|--|--|--|--|--|
| OMB Number: 3235-02 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: 0.9 | | | | | | | |

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

| Name and Address of Reporting Person* Farabaugh Brett | | | | 2. Issuer Name and Ticker or Trading Symbol TRANSENTERIX, INC. [TRXC] | | | | | | | (Che | ck all applic Directo | able) r | g Pers | 10% Ov | vner | | | | | | |
|---|--|------------|--|---|---|--|----------|---|--|---|--------------------|---|--|------------------------------------|---|--|---|--|--|--|--|--|
| (Last) 635 DAV SUITE 3 | IS DRIVE | irst) | (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2020 | | | | | | | | | X Officer (give title Other (specification) Interim CFO | | | | | |
| (Street) MORRIS (City) | SVILLE N | | 27560 (Zip) | | 4. II | | | | | | 6. Ind Line) | Form fi | ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date (Month/t | | | | ay/Year) Executio | | 2A. Deemed Execution Date, f any (Month/Day/Year) | | 3. Transaction Code (Instr. 5) | | | | | 5. Amou Securitie Beneficia Owned F Reported | es Fo ally (D) Following (I) | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | v | Amount | t (A) or (D) | | Price | Transaction(s) (Instr. 3 and 4) | | | | (| | | |
| Common Stock 06/30 | | | 06/30 |)/2020 | 20 M 30,000 A \$ | | \$0.00(1 | 30,000 | | | D | | | | | | | | | | | |
| | 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 | | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transaction Code (Instr. B) | | n of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | е | 7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4) | | ecurity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | i | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | O N O | lumber | | | | | | | | |
| Restricted Stock Units ⁽²⁾ | \$0.00 | 06/30/2020 | | | M | | | 30,000 | (1) | | (1) | Commo Stock | n 3 | 0,000 | \$0.00 | 0 | | D | | | | |

Explanation of Responses:

- 1. Lapse of forfeiture restrictions on this grant of restricted stock units ("RSUs") awarded on January 2, 2020.
- 2. Each RSU represents the right to receive one share of the Registrant's common stock.

Remarks:

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

07/01/2020

** 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.