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The reader should not assume that the information is accurate and complete.

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

Notice of Exempt Offering of Securities

OMB APPROVAL

OMB Number: 3235-0076

Estimated average burden

hours per response: 4.00

1. Issuer's Identity

CIK (Filer ID Number)	Previous Names	X None	Entity Type
0001356090			X Corporation
Name of Issuer			Limited Partnership
INTREXON CORP			Limited Liability Company
Jurisdiction of Incorporation/Organization			General Partnership
VIRGINIA			Business Trust
Year of Incorporation/Organization			Other (Specify)
X Over Five Years Ago			
Within Last Five Years (Specify Year)			
Yet to Be Formed			

2. Principal Place of Business and Contact Information

Name of Issuer			
INTREXON CORP			
Street Address 1	Street Address 2		
1750 KRAFT DRIVE	SUITE 1400		
City	State/Province/Country	ZIP/PostalCode	Phone Number of Issuer
BLACKSBURG	VIRGINIA	24060	540-961-0725

3. Related Persons

Last Name	First Name	Middle Name
Reed	Thomas	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Crisp	Matt	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Sterling	Rick	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Beech	Robert	P.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Kirk	Randal	J.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Alvarez	Cesar	L.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Frank	Steven	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: Executive Officer X Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Horner	Larry	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Mitchell	Dean	J.
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Sobel	Burton	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Nedwin	Glenn	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Colon	Grace	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Goralski	Tom	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Zapata	Gerardo	

Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Kasser	Thomas	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Lehr	Donald	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Webster	Darryl	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Kasbe	Timothy	
Street Address 1	Street Address 2	
1750 KRAFT DRIVE	SUITE 1400	
City	State/Province/Country	ZIP/PostalCode
BLACKSBURG	VIRGINIA	24060
Relationship: X Executive Officer Director Promoter		

Clarification of Response (if Necessary):

4. Industry Group

Agriculture	Health Care	Retailing
Banking & Financial Services	X Biotechnology	Restaurants
Commercial Banking	Health Insurance	Technology
Insurance	Hospitals & Physicians	Computers
Investing	Pharmaceuticals	Telecommunications
Investment Banking		

Pooled Investment Fund
 Is the issuer registered as an investment company under the Investment Company Act of 1940?
 Yes No
 Other Banking & Financial Services
 Business Services
 Energy
 Coal Mining
 Electric Utilities
 Energy Conservation
 Environmental Services
 Oil & Gas
 Other Energy

Other Health Care
 Manufacturing
 Real Estate
 Commercial
 Construction
 REITS & Finance
 Residential
 Other Real Estate

Other Technology
 Travel
 Airlines & Airports
 Lodging & Conventions
 Tourism & Travel Services
 Other Travel
 Other

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505
Rule 504 (b)(1)(i)	X Rule 506
Rule 504 (b)(1)(ii)	Securities Act Section 4(5)
Rule 504 (b)(1)(iii)	Investment Company Act Section 3(c)
	Section 3(c)(1)
	Section 3(c)(2)
	Section 3(c)(3)
	Section 3(c)(4)
	Section 3(c)(5)
	Section 3(c)(6)
	Section 3(c)(7)
	Section 3(c)(9)
	Section 3(c)(10)
	Section 3(c)(11)
	Section 3(c)(12)
	Section 3(c)(13)
	Section 3(c)(14)

7. Type of Filing

X New Notice Date of First Sale 2011-10-31 First Sale Yet to Occur
 Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

Equity
 Debt
 Option, Warrant or Other Right to Acquire Another Security
 Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security

Pooled Investment Fund Interests
 Tenant-in-Common Securities
 Mineral Property Securities
 Other (describe)

10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer? Yes No

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient Recipient CRD Number None
(Associated) Broker or Dealer None (Associated) Broker or Dealer CRD Number None

Street Address 1

Street Address 2

City State/Province/Country ZIP/Postal Code

State(s) of Solicitation (select all that apply) All States Foreign/non-US
Check "All States" or check individual States

13. Offering and Sales Amounts

Total Offering Amount \$1,092,344 USD or Indefinite
Total Amount Sold \$1,092,344 USD
Total Remaining to be Sold \$0 USD or Indefinite

Clarification of Response (if Necessary):

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering.
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions \$0 USD Estimate
Finders' Fees \$0 USD Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
INTREXON CORP	/s/ Rick L. Sterling	Rick L. Sterling	Chief Financial Officer	2011-11-14

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.