FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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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* Ares Trading S.A.					2. Issuer Name and Ticker or Trading Symbol PRECIGEN, INC. [PGEN]										all app Direc	tor	ng Per X	10% O	Owner
	(First) (Middle) E L'OURIETTE 151					3. Date of Earliest Transaction (Month/Day/Year) 09/01/2021									Office below	er (give title v)	Other (below)		specify
ZONE INDUSTRIELLE DE L'OURIETTAZ						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) AUBONNE V8 1170													X	Form	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (ž	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				y/Year) Execu		Deemed oution Date, / oth/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acc Disposed Of (D)				5. Amo Securit Benefic Owned Report	ties cially I Following	Form (D) o	n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) o (D)	r Pric	Co Tran		action(s) 3 and 4)			(1150.4)	
Common Stock 09/01/				09/01/2)21				S ⁽¹⁾		254,932	D	D \$6.20		8 21,362,391		D		
Common Stock 09/02/20				021)21					139,415	D \$6.		2358	3 21,222,976			D		
		Tal	ble II								osed of, c				Owne	d			
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) if any ice of (Month/Day/Year)		tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Day (Month/Day/)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)
Evalanation					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	or Number of Shares						

1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by Ares Trading, S.A. on April 29, 2021.

This Form 4 is being filed by each of the following persons (together, the Reporting Persons): Ares Trading SA, the direct beneficial owner of the shares, Merck Serono SA, Aubonne, Switzerland, an affiliate of Merck KGaA, Darmstadt, Germany, an indirect beneficial owner of the shares. Ares Trading SA is a dominantly controlled subsidiary of Merck Serono SA, Aubonne, Switzerland, an affiliate of Merck KGaA, Darmstadt, Germany. Merck Serono SA, Aubonne, Switzerland is a wholly owned I indirect subsidiary of Merck KGaA, Darmstadt, Germany. Merck KGaA, Darmstadt, Germany is a publicly traded company (Frankfurt Stock Exchange, DAX 30) and the beneficiary of the two companies.

/s/ Cearic Hyae, Authorized	
Signatory of Merck Serono	09/03/2021
<u>SA</u>	
/s/ Florence Jolidon, Authorized Signatory of Merck Serono SA	09/03/2021
/s/ Cedric Hyde, Authorized Signatory of Ares Trading SA	09/03/2021
/s/ Tearaboth Te, Authorized Signatory of Ares Trading SA	09/03/2021
/s/ Andreas Stickler, Authorized Signatory of Merck KGaA	09/03/2021
/s/ Tobias Greven, Authorized Signatory of Merck KGaA	09/03/2021
** Signature of Reporting Person	Date

/c/ Codric Hydo Authorized

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.