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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) (First) (Middle) RUE DE L'OURIETTE 151						3. Date of Earliest Transaction (Month/Day/Year) 07/29/2021									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 filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)						Execution Date,						s Acquired (A) or f (D) (Instr. 3, 4 a		nd Securit		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	r Price		Transa	ea ction(s) 3 and 4)			(Instr. 4)
Common Stock 07/29/20					021				S ⁽¹⁾		18,247	D	\$5.6	856 22,8		885,249		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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year		4. Transaction Code (Instr. 8)		of	r osed (, 3, 4	Expira	e Exercisable and ation Date h/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		t		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)
					Code	v	(A)	(D)	Date Exerci:	sable	Expiration Date	Title	of Shares						

Explanation of Responses:

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/ Cedric Hyde, Authorized Signatory of Merck Serono 08/02/2021 SA /s/ Florence Jolidon, Authorized Signatory of 08/02/2021 Merck Serono SA /s/ Cedric Hyde, Authorized 08/02/2021 Signatory of Ares Trading SA /s/ Tearaboth Te, Authorized 08/02/2021 Signatory of Ares Trading SA /s/ Andreas Stickler, 08/02/2021 Authorized Signatory of Merck KGaA /s/ Tobias Greven, Authorized 08/02/2021 Signatory of Merck KGaA

> > Date

** Signature of Reporting Person

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.