FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number: 3235-0104

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

or Section 30(h) of the Investment Company Act of 1940													
1. Name and Address of Reporting Person* 2. Date of Event (Month/Day/Year 07/20/2015				Year)	Statement		3. Issuer Name and Ticker or Trading Symbol INTREXON CORP [XON]						
(Last) 20374 SENECA MEA	(First)	(Middle)				Relationship of Reporting Person(s) to Issuer (Check all applicable) Director			10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) GERMANTOWN	,					x	Officer (give title below) SVP, Finance		Other (specify below)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)											
Table I - Non-Derivative Securities Beneficially Owned													
1. Title of Security (Instr. 4)							3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock						150,000		D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month)Day/Year)					3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) 4. Convers Exercise P of Derivative			ice	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
Date Exercisa				Date Exercisable	Expiration Date	Title			Amount or Number of Shares	Security			

Explanation of Responses:

Remarks:

/s/ Joel D. Liffmann, by Donald P. Lehr, Power 07/21/2015

of Attorney
** 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 5 (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.

SECTION 16

POWER OF ATTORNEY

I, Joel D. Liffmann, do hereby constitute and appoint Donald P. Lehr and Rick L. Sterling, my true and lawful attorneys-in-fact, either of whom acting singly is here I do hereby ratify and confirm all acts my said attorney shall do or cause to be done by virtue hereof. I acknowledge that the foregoing attorneys-in-fact, serving This power of attorney shall remain in full force and effect until it is revoked by the undersigned in a signed writing delivered to each such attorney-in-fact or the WITNESS the execution hereof this 17th day of July, 2015.

/s/ Joel D. Liffmann

Joel D. Liffmann