

INTROGEN THERAPEUTICS INC  
Form 4  
March 23, 2006

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
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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 OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
Aventis Inc.

2. Issuer Name and Ticker or Trading Symbol  
INTROGEN THERAPEUTICS INC  
[INGN]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)  
3711 KENNETT PIKE, SUITE 200,  
(Street)

3. Date of Earliest Transaction  
(Month/Day/Year)  
03/21/2006

\_\_\_\_ Director  
\_\_\_\_ Officer (give title below)  Other (specify below)  
10% Owner  
10% owner and beneficial owner

GREENVILLE, DE 19807

(City) (State) (Zip)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D)	Price		
			Code	V	Amount		
Common	03/21/2006		S		\$ 15,843	D	
					5.36		
					4,188,410 <sup>(1)</sup>	I	SFN <sup>(2)</sup>

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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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)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
						Date Exercisable	Expiration Date	Title	Amount or Number of Shares
						Code	V	(A)	(D)

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Aventis Inc. 3711 KENNETT PIKE, SUITE 200 GREENVILLE, DE 19807				10% owner and beneficial owner
AVENTIS HOLDINGS INC 3711 KENNETT PIKE SUITE 200 GREENVILLE, DE 19807				10% owner and beneficial owner

## Signatures

Kathleen A. Winter,  
President 03/23/2006

\_\_Signature of Reporting Person Date

Kathleen A. Winter,  
President 03/23/2006

\_\_Signature of Reporting Person Date

## Explanation of Responses:

- \* 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).
- (1) Updated to reflect the conversion of 100,000 Preferred Shares into 2,343,721 Common Shares on June 21, 2005, which shares are directly owned by Aventis Pharmaceuticals Inc.  
For Reporting Person Aventis Holdings Inc., reflects ownership of (i) 1,844,689 shares of common stock owned directly by Aventis Holdings Inc., and (ii) 2,343,721 shares of common stock owned by its subsidiary Aventis Pharmaceuticals Inc. For Reporting Person Aventis Inc. reflects indirect ownership of shares owned directly by Aventis Holdings Inc. and Aventis Pharmaceuticals Inc.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.