Edgar Filing: IntelGenx Technologies Corp. - Form 4

| IntelGenx Ter Form 4 April 02, 200 | chnologies Cor 9 | р. | | | | | | | | | | |
|---|---|---|---|--|-----------------|--------|---------------------|---|--|---|--|--|
| • · | | | | | | | | OMB APPROVAL | | | | |
| CURIVI 4 UNITED STATES SECURITIES AND E Washington, D.C. | | | | | | | NGE (| COMMISSION | OMB Number: | 3235-0287 | | |
| Check this if no long subject to Section 16 Form 4 or Form 5 obligation may conti <i>See</i> Instru- 1(b). | er STATE 5. Filed pu ^s Section 17 | 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 20(b) of the Investment Company Act of 1940 | | | | | | | | Expires:January 31, 2005Estimated average burden hours per response0.5 | | |
| (Print or Type R | esponses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Northern Rivers Capital Management Inc. | | | 2. Issuer Name and Ticker or Trading Symbol IntelGenx Technologies Corp. [IGXT] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| | NK PLAZA, N ITE 2000, P.O. | | 3. Date of (Month/D 03/31/20 | - | ansaction | | | Director Officer (give below) | title Other below) | 6 Owner er (specify | | |
| TODONTO | (Street) | | | ndment, Da th/Day/Year) | - | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| TORONTO, | A6 M5J2J2 | | | | | | | Person | | porting | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Securi | ities Acc | quired, Disposed of | f, or Beneficial | ly Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date 2A. Dee (Month/Day/Year) Execution any (Month/ | | | 3. Transactio Code (Instr. 8) | | ispose | d of | Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Shares, par value \$0.00001 | 03/31/2009 | | | Code V | Amount 1,000 | | Price \$ 0.36 | (Instr. 3 and 4) 2,317,800 | D | | | |
| per share (1) | | | | | | | | | | | | |

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

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number.

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. Transactic Code (Instr. 8) | 5. oriNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | Date | Amo Unde Secur | tle and unt of crlying rities :. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|----------------------|---|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |
| Reporting Owners | | | | | | | | | | | |
| | Reporting Owner Name / Address | | | | | Relationships | er Other | | | | |
| ROYAL I P.O. BOX | BANK PLA | ital Management I ZA, NORTH TO AY STREET 2J2 | | 00 | | X | | | | | |
| Signa | tures | | | | | | | | | | |
| /s/ Northern Rivers Capital Management, Inc., by Scott Laskey, Chief I Officer | | | | | | ancial | (|)4/02/ | /2009 | | |
| | | <u>**</u> Signature | of Reporting Person | | | | | Dat | te | | |
| Expla | nation | of Respo | nses: | | | | | | | | |

Explanation of nesponses.

- * 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) Northern Rivers Capital Management Inc. disclaims beneficial ownership of any and all such securities in excess of its actual pecuniary interest.

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.