Edgar Filing: ATHERSYS, INC / NEW - Form 4

ATHERSY	S, INC / NEW										
Form 4											
June 21, 20	16										
FOR	ЛД									PPROVAL	
	UNITED	STATES					NGE	COMMISSIO	N OMB	3235-0287	
Check	this box		Wa	shington	, D.C. 20)549			Number:		
if no lo	ngor								Expires:	January 31, 2005	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSH							VNERSHIP OI	Estimated			
	Section 16. SECURITIES Form 4 or								burden hou	•	
Form 5		repart to	Section	16(a) of th	ne Securi	ties Fr	chan	ge Act of 1934	response	. 0.5	
obligati	ions Section 17							of 1935 or Sect			
may co	nunue.			nvestmen	•	- ·			ion		
<i>See</i> Ins 1(b).	truction	20(11)	or the h	ii vestinen	i compu		01 12				
1(0)											
(Print or Type	e Responses)										
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of							of Reporting Per	Reporting Person(s) to			
Randall Lo	orin		Symbol					Issuer			
			ATHE	RSYS, IN	IC / NEV	V [ATH	HX]	(Ch	eck all applicabl	all applicable)	
(Last) (First) (Middle)			3. Date of Earliest Transaction					(01	and an approach		
			(Month/Day/Year)					_X_Director10% Owner			
			06/20/2016					Officer (give title Other (specify below) below)			
1200								,	,		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
		Filed(Mo	onth/Day/Yea	r)			Applicable Line) _X_ Form filed by One Reporting Person				
CLEVEL	ND OU 44115 7	621							More than One R		
CLEVELA	AND, OH 44115-2	2034						Person			
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securit	ties Ao	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date					5. Amount of	6. Ownership	7. Nature of			
Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Code Disposed of (D)				Securities	Form: Direct (D) or Indirect	Indirect	
(Instr. 3)								Beneficially Owned	(D) or indirect (I)	Ownership	
				. ,				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D) F	Price	()			
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned dire	ctly of	r indirectly.			
					-		-	pond to the colle	ection of	SEC 1474	
								ained in this forr		(9-02)	

Persons who respond to the collection of SEC 147 information contained in this form are not (9-0) required to respond unless the form displays a currently valid OMB control number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orDerivative	Expiration Date	Underlying Securitie
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)		Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
NonQualified Stock Option (right to purchase)	\$ 2.19	06/20/2016		А		30,000		<u>(1)</u>	06/20/2026	Common Stock	30,0

Reporting Owners

Reporting Owner Name / Address		Relationsh							
	Director	10% Owner	Officer	Other					
Randall Lorin 3201 CARNEGIE AVENUE SUITE 1200 CLEVELAND, OH 44115-2634	Х								
Signatures									
/s/ Laura K. Campbell, as attorne Randall	06/21/2016								

**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) Award of a nonqualified stock option. The option vests ratably on a quarterly basis over a one-year period.

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.