FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL O	OWNERSHIP
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**OMB APPROVAL** OMB Number: 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

1. Name and Address of Reporting Person*  LYONS GARY A					2. Issuer Name and Ticker or Trading Symbol  CYTORI THERAPEUTICS, INC. [ CTYX ]						[] (Ch	Relationship ( leck all applic X Directo	cable)	· '			
(Last) 3020 CA	ast) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/26/2017						Officer below)	(give title		Other (s below)	pecify	
(Street) SAN DIEGO CA 92121  (City) (State) (Zip)				_	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3) 2. Transa Date			Transaction	action 2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.   5)			ed (A) or	or 5. Amount o		Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code V				(D)	1 , ,		nsaction(s) tr. 3 and 4)			(1130.4)				
		•	Table II - De (e.					uired, Dis , options,				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year		3A. Deemed Execution Dat if any (Month/Day/Ye	Code	Transaction Code (Instr.		ve les ed ed nstr.	6. Date Exercisable a Expiration Date (Month/Day/Year)		d 7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to	\$1.56 <sup>(1)</sup>	01/26/2017		A		25,000		01/26/2018	01/26/2023	Common Stock	25,000	\$0.00	25,000	0	D		

## **Explanation of Responses:**

1. The reporting person received a non-qualified stock option granted under the Issuer's 2014 Equity Incentive Plan. The exercise price per share to be paid by the reporting person at the time the option is exercised is the closing sale price of the Issuer's Common Stock on the NASDAQ Stock Market as of the date of the grant. The closing sale price on the date of the grant was \$1.56.

## Remarks:

Jeremy Hayden, By Power of Attorney For: Gary Lyons

01/27/2017

\*\* Signature of Reporting Person

Date

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.