FORM 4

## 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 obligations may continue. See Instruction 1(b).	STAT

## EMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**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*  Naughton Gail K					2. Issuer Name and Ticker or Trading Symbol  CYTORI THERAPEUTICS, INC. [ CTYX ]								] (Ch	Relationship of the contract o	•		son(s) to Issi 10% Ow	
(Last) 3020 CA	(F LLAN RO.	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/26/2017									Officer below)	(give title		Other (s below)	pecify
(Street) SAN DII (City)			92121 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Date				2. Transa	action	ear)	2A. Deemo Execution if any	ed Date	3. 4. Transaction Di Code (Instr. 5)		Securities Acquired (A)			5. Amou Securitie Beneficia	nt of es ally	6. Ownership Form: Direct (D) or Indirect		7. Nature of Indirect Beneficial
					(Month/Day/Yea		Code V	Amou	nt	(A) or (D)	Price	Owned F Reported Transact (Instr. 3 a	ion(s)	(I) (In		Ownership (Instr. 4)		
		-							uired, Dis , options					Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) f ive	3A. Deemed Execution E if any (Month/Day	ate, Trans Code					6. Date Exer Expiration D (Month/Day/	ate	Of U D	7. Title and Ame of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ve es ally ig d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisable	Expiration Date		ïtle	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	01/26/20		Common Stock	25,000	\$0.00	25,000	)	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: Gail Naughton

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.