FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
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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).

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*						2. Issuer Name and Ticker or Trading Symbol CALADRIUS BIOSCIENCES, INC. [CLBS									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Mazzo David J					Ιĭ	THE IDITION DIOSCILITORS, IIVC. [CLBS									X Director			10% Ow	ner	
(Last)	(F	irst)	(Middle)		- L'	1									Officer (below)	give title		Other (s below)	pecify	
	`	, BIOSCIENCES,	INC.		3.	Date of Earliest Transaction (Month/Day/Year)									Ch	ief Exec	Officer			
110 ALLEN ROAD, 2ND FLOOR					01	01/08/2018														
(Street)					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
BASKIN	IG N	J	07920												X Form filed by One Reporting Person					
RIDGE					_									Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)																	
		Tal	ole I - Nor	n-Deri	vativ	e Se	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	ficiall	y Owned					
1. Title of Security (Instr. 3) 2. Trans: Date (Month/L					Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities A Disposed Of (Beneficia Owned F	s illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		A) or D)	Price	Reported Transact (Instr. 3 a	ion(s)			Instr. 4)	
Common Stock 01/08/					08/201	3/2018		A		33,300(1)		A	\$0	96,706(2)			D			
Common Stock 01/08				08/201	3/2018		F		4,462		D	\$0	92,2	44 ⁽²⁾		D				
			Table II -								osed of, onvertib				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 I if any (Month/Day	Date,	4. Transactio		5. Number n of		6. Date Exe Expiration (Month/Da	Date	ble and 7. Title of Secu		Title and Amount Securities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisabl		Expiration Date	Title	o N	mount r lumber f hares						
Stock Option	\$3.79	01/08/2018			A		50,000		01/08/2018	(3)	01/08/2028	Com		20,000	\$0	20,000	0	D		

Explanation of Responses:

- 1. Represents 33,300 shares of restricted stock granted under the Issuer's 2015 Equity Compensation Plan. The restricted stock vests in three equal installments, with one-third of the shares vesting on the date of grant and an additional one-third vesting on each of the first and second anniversaries of the grant date.
- 2. Includes 67,269 shares of unvested restricted stock.
- 3. One-third of the shares underlying the stock options vest immediately on the grant date, with an additional one-third vesting on each of the first and second anniversaries of the grant date.

David J. Mazzo, By: /s/ Todd C

Girolamo, Esq., Attorney-in- 01/10/2018

<u>Fact</u>

** 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.