FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	
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OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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(c). S	ee Instruction 1	0.														
Name and Address of Reporting Person*     Nisco James				2. Issuer Name <b>and</b> Ticker or Trading Symbol LISATA THERAPEUTICS, INC. [ LSTA ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
	<u>ranies</u>													er (give title	Other	(specify
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)						┨	below) below)  SVP, Fin/Treas, Chief Actg Off			′ I
C/O LISATA THERAPEUTICS, INC.				10/01/2024									,			
110 ALL	EN ROAD	, 2ND FLOOR														
(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)				
BASKIN	IG NJ		7920									Form	Form filed by One Reporting Person			
RIDGE	INJ		1920										Form Pers		re than One Re	porting
(City)	(St	ate) (Z	Zip)													
		Table	I - No	n-Deriva	tive S	ecur	ities Acq	uired,	Dis	posed of,	or Bei	nefici	ally Own	ed		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 5)			, 4 and Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price		ted action(s) 3 and 4)		(Instr. 4)
Common Stock 10/01/2				2024			A		3,300(1)	A	\$2.9	93 14	·,657 <sup>(2)</sup>	D		
Common Stock 10/01/2					2024			F		1,701(3)	D	\$2.9	93 12	,956(2)	D	
		Tal					ies Acqu varrants,							d		
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transac Code (Ir 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4			te Amount of		of s ng e	8. Price of Derivative Security (Instr. 5)  (Instr. 5)  (Instr. 5)  (Instr. 6)  9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)		Ownershi Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

1. Reflects 3,300 in performance-based stock units, the criteria for which was satisfied on October 1, 2024 and which vested in full on that same day.

Code

- 2. Includes 9,482 unvested restricted stock
- 3. Shares withheld as payment of a tax liability on vesting of performance-based stock units.

## Remarks:

James Nisco

10/02/2024

\*\* Signature of Reporting Person

Amount or Number

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.

and 5)

(A) (D) Date Exercisable