FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

Name and Address of Reporting Person* Mazzo David J						2. Issuer Name and Ticker or Trading Symbol Caladrius Biosciences, Inc. [CLBS]										all app Direc			wner		
(Last) (First) (Middle) C/O CALADRIUS BIOSCIENCES, INC. 106 ALLEN ROAD						3. Date of Earliest Transaction (Month/Day/Year) 05/18/2017									X	below)			Other (specify below) utive Officer		
(Street) BASKING RIDGE NJ 07920 (City) (State) (Zip)					4. If										. Indivine) X	′					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date					Date Month/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			and Secu Bene Own		cially I Following	Form (D) or	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(11150.4)	
Common Stock 05.					05/18/2017						17,77	8	D	\$5.13		56,551			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution or Exercise (Month/Day/Year) if any			Date, Transaction		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	O Fe Di (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Exercisa	able	Date	Title		res							

Explanation of Responses:

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

Todd C. Girolamo, Esq.,

05/22/2017

Attorney-in-Fact

** 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.