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Cytosorbent Form 4	s Corp										
June 01, 201	5										
FORM	14					~~~			OMB AF	PPROVAL	
	UNITED	STATES S			AND EX(, D.C. 20		NGE CO	OMMISSION	OMB Number:	3235-0287	
Check th if no lon; subject to Section 1 Form 4 c	IENT OF	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligatio may com <i>See</i> Instr 1(b).	tinue. Section 17(a) of the Pu	ublic Ut	tility Hol		npany	Act of	Act of 1934, 1935 or Section		0.0	
(Print or Type]	Responses)										
1. Name and Address of Reporting Person <u>*</u> Kraus Al			8					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (I		3. Date of Earliest Transaction (Check						all applicable)		
C/O CYTOSORBENTS CORPORATION, 7 DEER PARK DRIVE, SUITE K			05/28/2015 -					_X_ Director 10% Owner Officer (give title Other (specify below) below)			
			Filed(Month/Day/Year) A					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
MONMOU JUNCTION							l	Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	ities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3.4. Securities Acquired (Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			(D)	Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)		
Common Stock	05/28/2015			M <u>(1)</u>	10,000	А		65,746	D		
Common Stock	05/28/2015			S <u>(1)</u>	10,000	D	\$ 6.3247 (2) (3)	55,746	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of nDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option	\$ 0.875	05/28/2015		M <u>(1)</u>		10,000	06/25/2008	06/25/2018	Common Stock	10,000

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Kraus Al C/O CYTOSORBENTS CORPORATION 7 DEER PARK DRIVE, SUITE K MONMOUTH JUNCTION, NJ 08852	X						
Signatures							
/s/ Ronald E. Berger, attorney-in-fact For A Kraus	1	06/01/20	015				
** Signature of Reporting Person		Date					
Explanation of Response	es:						

- * 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).
- (1) Stock option exercise and open market sales pursuant to a 10b5-1 trading plan adopted by the Reporting Person in accordance with rule 10b5-1 of the Securities Exchange Act of 1934, as amended.
- (2) The price in column 4 is a weighted average price. The prices actually received by the reporting person in this transaction range from \$6.12 to \$6.55.
- (3) The reporting person has provided to the issuer, and the issuer will provide to any security holder of the issuer or the SEC staff, upon request, information regarding the number of shares purchased at each price within the range reported.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.