Amarantus Bioscience Holdings, Inc.

Form 4

January 14, 2015

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box

if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Amarantus Bioscience Holdings, Inc.

(Print or Type Responses)

1(b).

(Last)

SUITE 900

(City)

1. Name and Address of Reporting Person \*

(First)

**GLADSTONE ROSS IAIN** 

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year) C/O 655 MONTGOMERY STREET, 01/12/2015

Symbol

[AMBS]

(Street)

4. If Amendment, Date Original

Filed(Month/Day/Year)

Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

5. Relationship of Reporting Person(s) to

(Check all applicable)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Issuer

below)

X\_ Director

Officer (give title

SAN FRANCISCO, CA 94111

(State)

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

(Month/Day/Year)

(Zip)

3. 4. Securities TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

(A)

or

5. Amount of Securities Beneficially Owned Following

6. Ownership Form: Direct (I) (Instr. 4)

Indirect (D) or Indirect Beneficial Ownership (Instr. 4)

(9-02)

7. Nature of

10% Owner

Other (specify

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

Reported Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

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

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Conversion 3. Transaction Date 3A. Deemed

5. Number of (Month/Day/Year) Execution Date, if TransactionDerivative

6. Date Exercisable and **Expiration Date** 

7. Title and Amo Underlying Secur

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| Security<br>(Instr. 3)                   | or Exercise Price of Derivative Security |            | any<br>(Month/Day/Year) | Code (Instr. 8) | Securities<br>Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4, and 5 | (Month/Day/Year)   |                    | (Instr. 3 and 4) |                 |
|--|--|------------|-------------------------|-----------------|---|--------------------|--------------------|------------------|-----------------|
|  |  |            |                         | Code V          | (A) (D  | ) Date Exercisable | Expiration<br>Date | Title            | An<br>Nu<br>Sha |
| Option to<br>Purchase<br>Common<br>Stock | \$ 0.08                                  | 01/12/2015 |                         | A               | 6,490,000   | 01/12/2015(1)      | 01/12/2025         | Common<br>Stock  | 6,4             |

## **Reporting Owners**

SAN FRANCISCO, CA 94111

#### Relationships

GLADSTONE ROSS IAIN C/O 655 MONTGOMERY STREET, SUITE 900 X

# **Signatures**

/s/ Iain Gladstone Ross 01/14/2015

\*\*Signature of Date
Reporting Person

## **Explanation of Responses:**

- \* 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) Such shares shall vest in equal monthly installments beginning on the date of grant for a period of 48 months until it is entirely vested, subject to continued service with the Issuer.
- (2) Granted to Reporting Person by the Issuer for services as a Director provided to the Issuer.

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.

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