Allickson Julie Form 4 February 03, 2010

#### FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction 1(b).

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

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

(Print or Type Responses)

(Last)

(City)

(Instr. 3)

Common

Stock

1. Name and Address of Reporting Person \* Allickson Julie

(First) (Middle)

700 BROOKER CREEK

BLVD., SUITE 1800

(Street)

(State)

OLDSMAR, FL 34677

2. Issuer Name and Ticker or Trading

Symbol

CRYO CELL INTERNATIONAL INC [CCEL]

3. Date of Earliest Transaction (Month/Day/Year)

02/01/2010

4. If Amendment, Date Original

Filed(Month/Day/Year)

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

(Zip)

(Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D)

(Instr. 3, 4 and 5) (Instr. 8)

(A)

or Code V Amount (D) Price

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

OMB

Number:

Expires:

response...

Estimated average

burden hours per

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

Director 10% Owner

X\_ Officer (give title Other (specify below)

VP, Laboratory and R&D

6. Individual or Joint/Group Filing(Check

Applicable Line) \_X\_ Form filed by One Reporting Person

Form filed by More than One Reporting

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

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Ownership Indirect (I)

(Instr. 4)

(Instr. 4)

2,031 D

5. Amount of

Securities

Owned

Beneficially

Following

Transaction(s)

(Instr. 3 and 4)

Reported

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 (9-02)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)

#### Edgar Filing: Allickson Julie - Form 4

De

(In

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. Transacti Code (Instr. 8)	5. Number coof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exer Expiration E (Month/Day	Pate	7. Title and 2. Underlying 9 (Instr. 3 and	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option	\$ 2.05					<u>(1)</u>	04/18/2014	Common Stock	15,000
Stock Option	\$ 3.34					<u>(2)</u>	04/04/2013	Common Stock	18,624
Stock Option	\$ 1.73					<u>(2)</u>	08/03/2016	Common Stock	18,563
Stock Option	\$ 1.5	02/01/2010		A	9,281	(2)	02/01/2017	Common Stock	9,281

### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
• 0	Director	10% Owner	Officer	Other		
Allickson Julie 700 BROOKER CREEK BLVD. SUITE 1800 OLDSMAR, FL 34677			VP, Laboratory and R&D			

# **Signatures**

Julie Allickson	02/03/2010		
**Signature of Reporting Person	Date		

## **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) 1/12 of the shares on the grant date, and the remaining portion will vest in 11 equal installments at the conclusion of each succeeding month
- (2) 1/3 one-year from the grant date, 1/3 two years from the grant date, 1/3 three years from the grant date

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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