Cellular Biomedicine Group, Inc.

Form 4

November 13, 2014

### FORM 4,

Check this box

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

OMB 2225

Washington, D.C. 20549

Number: 3235-0287

January 31,

2005

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**OMB APPROVAL** 

if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response...

Expires:

Form filed by More than One Reporting

Form 4 or 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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Liu Wen Tao Issuer Symbol Cellular Biomedicine Group, Inc. (Check all applicable) [CBMG] 10% Owner (Last) (First) (Middle) 3. Date of Earliest Transaction \_X\_\_ Director X\_ Officer (give title Other (specify (Month/Day/Year) below) 530 UNIVERSITY AVENUE, #17 11/10/2014 **Executive Chairman** (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person

PALO ALTO, CA 94301

(Ctota)

(C:tr.)

Stock

(City)	(State) (A	Table	I - Non-De	erivative Securities	Acquired, Disposed	of, or Beneficial	ly Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securities on Acquired (A) or	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect
(Instr. 3)		any	Code	Disposed of (D)	Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership
					Following	(Instr. 4)	(Instr. 4)
				(A)	Reported		
				or	Transaction(s) (Instr. 3 and 4)		
			Code V	Amount (D) Pr	rice (Ilisti. 3 alid 4)		
Common	11/10/2014		<b>J</b> (1)	2.403 A (1	188 340	D	

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

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SEC 1474

(9-02)

Person

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

#### Edgar Filing: Cellular Biomedicine Group, Inc. - Form 4

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transacti Code (Instr. 8)	ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Securi (Instr.	rlying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
•	Director	10% Owner	Officer	Other			
Liu Wen Tao							
530 UNIVERSITY AVENUE, #17	X		<b>Executive Chairman</b>				
PALO ALTO CA 94301							

# **Signatures**

/s/ Wen Tao Liu 11/13/2014

\*\*Signature of Person 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).

Reporting Person received 2,403 shares of common stock, par value \$0.001 per share (?Common Stock?), of Cellular Biomedicine (1) Group, Inc. (the ?Company?), which shares (the ?Compensation Shares?) were issued as compensation for the Reporting Person?s first two years of service on the board of Cellular Biomedicine Group Ltd., the Company?s wholly-owned British Virgin Islands subsidiary.

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.

Reporting Owners 2