FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person* <u>Lewis Michael</u>						2. Issuer Name and Ticker or Trading Symbol HISTOGENICS CORP [HSGX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner				
(Last) (First) (Middle) C/O HISTOGENICS CORPORATION 830 WINTER STREET, 3RD FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 12/02/2016								ive title		Other (s below)	pecify	
(Street) WALTHAM MA 02451					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)				****	• • •					1					
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Transa Date (Month/D				. Transac	nsaction 2 h/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securitie			es Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount o Securities Beneficially Following R Transaction	Owned eported	6. Owner Form: D (D) or In (I) (Instr	Direct Indirect E	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)				IIISU. 4)	
Common Stock 12/02					02/2016			С		996,779	(1) A	(1)	3,072,110		I		See Footnote ⁽²⁾	
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)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)		ate			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Series A Convertible Preferred	(1)	12/02/2016		С			2,242.7528 ⁽¹⁾	(1)		(1)	Common Stock	996,779(1	\$0.00	0		I	See Footnote ⁽²⁾	

Explanation of Responses:

- 1. All outstanding shares of the Issuer's Series A Convertible Preferred Stock converted on a 1:444.44444 basis into shares of the Issuer's Common Stock. These shares have no expiration date.
- 2. The reportable securities are owned by Wilmslow Estates Limited. The Reporting Person has no beneficial interest in the trust which ultimately owns the economic interest in Wilmslow Estates Limited, but other members of the Reporting Person's family are discretionary beneficiaries in such trust. To the extent the Reporting Person may be deemed to hold an indirect beneficial interest under applicable United States securities laws, the Reporting Person disclaims such beneficial interest. The Reporting Person disclaims beneficial ownership of these shares and this statement shall not be deemed an admission that the Reporting Person is the beneficial owner of such shares for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Remarks:

12/06/2016 /s/ Michael Lewis

Date

** Signature of Reporting Person

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.