FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to | STATI |
|----------------------------------------|-------|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

EMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* McArdle Kevin (Last) (First) (Middle) C/O HISTOGENICS CORPORATION 830 WINTER STREET, 3RD FLOOR | | | | | | Issuer Name and Ticker or Trading Symbol HISTOGENICS CORP [HSGX] Date of Earliest Transaction (Month/Day/Year) 02/26/2015 | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title older) Chief Financial Officer | | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------|-----|----------------------|------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------|----------------------------------------|---------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-----------|-------------------------------------------------------------------|--|--|
| (Street) WALTHAM MA 02451 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | 2A. Deemed Execution Date, | | | 3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) Code (Nstr. 8) A securities Acquired (A) Disposed Of (D) (Instr. 3, 5) Code (Nstr. 4) Amount (A) Or (D) P | | | ed (A) or tr. 3, 4 an | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | - | Table II - De | | | | | uired, Dis | | | or Ben | eficially | | , | <u> </u> | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Ye | Cod | saction e (Instr. | | | 6. Date Exercisa Expiration Date (Month/Day/Yea | | of Securities | | ies g Security | Derivative Security | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | Ownersh Form: Direct (D or Indirect (I) (Instr. | Ownership | Beneficial Ownership t (Instr. 4) | | |
| | | | | Cod | e V | V (A) (| | Date Exercisable | | xpiration ate | Title | Amount or Number of Shares | | | | | | | |
| Employee Stock Option (Right to Buy) | \$9.96 | 02/26/2015 | | A | | 27,000 | | (1) | 02 | 2/26/2025 | Common Stock | 27,000 | \$0.00 | 27,00 | 0 | D | | | |
| Employee Stock Option (Right to | \$9.96 | 02/26/2015 | | А | | 30,000 | | (2) | 02 | 2/26/2025 | Common Stock | 30,000 | \$0.00 | 30,00 | 0 | D | | | |

Explanation of Responses:

- 1. This option vests over four (4) years of service following February 26, 2016, with twenty-five percent (25%) vesting upon completion of one (1) year of continuous service and in thirty-six (36) equal monthly
- 2. This option shall vest in full if the Issuer's Common Stock price reaches \$19.92 per shares or above for any consecutive sixty (60) day period within four (4) years of the date of grant (the "Vesting Date"). In addition, if this option is exercised within one (1) year of the Vesting Date, the Reporting Person must hold shares (net of taxes) until the one (1) year anniversary of the Vesting Date.

Remarks:

/s/ Kevin McArdle

02/27/2015

** Signature of Reporting Person

Date

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.