### Edgar Filing: CESCA THERAPEUTICS INC. - Form 3

#### CESCA THERAPEUTICS INC. Form 3 August 26, 2016 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per

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)

<ol> <li>Name and Address of Reporting Person <u>*</u></li> <li>Â Boyalife Investment Inc.</li> </ol>			<ol> <li>Date of Event Requiring Statement</li> <li>(Month/Day/Year)</li> </ol>	3. Issuer Name and Ticker or Trading Symbol CESCA THERAPEUTICS INC. [KOOL]			
(Last)	(First)	(Middle)	08/22/2016	4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
2453 S. ARCHER AVE., SUITE B				(Check all applicable)			
(Street) CHICAGO, IL 60616				DirectorX_10% Own Officer Other (give title below) (specify below)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person
CHICAGO,	A ILA 6061	16					Form filed by More than One Reporting Person
(City)	(State)	(Zip)	Table I - I	Non-Derivat	ive Securiti	es Bei	neficially Owned
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owner (Instr.	*
Common Sto	ock		6,102,941		D	Â	
Reminder: Report on a separate line for each class of securities beneficiation owned directly or indirectly.			ially S	EC 1473 (7-02)	)		
	Person inform require	ation conta ed to respo	oond to the collection of ained in this form are not nd unless the form disp MB control number.	t			

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative	Security:	
			Security	Direct (D)	

response...

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Add	Relationships				
		10% Owner	Officer	Other	
Boyalife Investment Inc. 2453 S. ARCHER AVE. SUITE B CHICAGO, IL 60616	Â	ÂX	Â	Â	
Signatures					
/s/ Dr. Xiaochun Xu	08/26/2016				
**Signature of Reporting Person	Date				

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 5(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. 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.