Csimma Cristina

Form 3

FORM	3 UNI	FED STAT	ATES SECURITIES AND EXCHANGE COMMISSI				ION	<b>ON</b> OMB APPROVAL		
Wash				hington, D.C. 20549			OMB Number:	3235-0104		
	I	NITIAL S	TATEMENT C			OWNERS	SHIP OF		Expires:	January 31, 2005
		-	SH to Section 16(a) the Public Utility		Securities	-			Estimated a burden hou response	average Irs per
		30	(h) of the Invest	tment C	ompany A	ct of 1940				
(Print or Type Res	ponses)									
Person * Re			2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name <b>and</b> Ticker or Trading Symb Neuralstem, Inc. [CUR]				nbol	
(Last)	(First)	(Middle)	09/25/2017		4. Relations Person(s) to			5. If Amendment, Date Original Filed(Month/Day/Year)		
20271 GOLDENROD LANE, 2ND FLOOR					(Check all applicable)			(-		~,
	(Street)	- <b>^</b>			X Direc Office (give title bel	r Ot	% Owner her pelow)	Filing	vidual or Joir (Check Applica orm filed by On	ıble Line)
GERMANTO'	WN,A M	DA 20876						Fo	rm filed by Mo ing Person	re than One
(City)	(State)	(Zip)	Tal	ble I - N	on-Derivation	vative Securities Beneficially Owned				
1.Title of Security (Instr. 4)	y		Ben	Amount of neficially ( str. 4)	Securities Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Owner (Instr.	rship	indirect Benef	ficial
Common Stoc	k <u>(1)</u>		28,	,598		D	Â			
Reminder: Report owned directly or		ate line for ea	ch class of securitie	s benefici	ally	SEC 1473 (7-	02)			
	inform require	ation conta ed to respo	oond to the collec ined in this form nd unless the for //B control numb	i are not rm displa	ays a					

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

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

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

## **Reporting Owners**

		Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Csimma Cristina 20271 GOLDENROD LANE, 2ND FLO GERMANTOWN, MD 20876	OR	ÂX	Â	Â	Â	
Signatures						
/s/ Cristina Csimma, Pharm.D., MHP	10/03	/2017				
<u>**</u> Signature of Reporting Person	Da	ate				

## **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).

The shares represented are restricted stock grants pursuant to compensatory Annual partial Grant for director services of \$50,000. The
(1) shares vest as follows: (i) 1,224 shares on September 30, 2017, (ii) 9,125 shares on December 31, 2017, (iii) 9,125 shares on March 31, 2018, and (iv) 9,124 shares on June 30, 2018, subject to holder continuing to be a service prover to the issuer.

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.