FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasimigton,	D.O. 20040	

OMB APPROVAL

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0.5

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 or Section 30(h) of the Investment Company Act of 1940

										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
1. Name and Address of Reporting Person* MAYLEBEN TIMOTHY M					2. Issuer Name and Ticker or Trading Symbol AASTROM BIOSCIENCES INC [ASTM]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
MAYLEBEN HMUTHY M				-									X	Director			10% Ow	ner	
(Last)	(F	First)	(Middle)	3	Date of Earliest Transaction (Month/Day/Year)								X	Officer (give title below)			Other (s below)	pecify	
C/O AASTROM BIOSCIENCES, INC.					06/25/2012									President and CEO					
· · · · · · · · · · · · · · · · · · ·																			
P.O. BOX 376														C. Individual on Taint/Opens Filips (Obselv A. 17. 11.					
(Chroat)						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	DOD 1	/IT	48106										X Form filed by One Reporting Person						
ANN ARBOR MI 48106													Form filed by More than One Reporting						
(0:)	,,		(:)	_									Person						
(City)	(5	State)	(Zip)																
		Та	ble I - Non-D	erivati	ve Se	ecurities	s Ac	quired, D	isp	osed o	f, or Be	neficial	ly C	wned					
1. Title of S	Security (Ins	tr. 3)		ransacti				3.		4. Securi	ties Acquire	ed (A) or		5. Amoun				7. Nature of	
Date (Month/D					Pay/Year) Execution Date, if any (Month/Day/Year			Code (Instr.				tr. 3, 4 and	['] Beneficia		lly (D) or ollowing (I) (In:	r Indirect E str. 4) C	Indirect Beneficial Ownership (Instr. 4)		
													Owned For Reported						
										Amount	(A) oi (D)	Price	- 1	Transaction (Instr. 3 a	ion(s)			,	
											1,,				iu 4)				
			Table II - Der (e.ç					uired, Dis , options					Ov	vned					
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Numbe	er of	6. Date Exer	rcisa	ble and	7. Title and	d Amount	unt 8. Price of		9. Number of		10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date, if any	Transa		Derivative Securities		Expiration D (Month/Day)		,	of Securities Underlying			Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)	Instr. 3) Price of (Month/Day/Year) 8)				Acquired (A) Derivative Secu						Security		nstr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)		
	Derivative or Disposed (Instr. 3 and of (D) (Instr.)								iu 4)		Followin		g (I) (Ins	(I) (Instr. 4)	(instr. 4)				
			3, 4 and 5)				4		Reported Transaction(s)										
												Amount			(Instr. 4)				
				Code	l _v	(A)	(D)	Date Exercisable		piration	Title	Number of Share							
		<u> </u>		Coue	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(A)	(0)	Exercisable	100	ite	Title	OI SIIAIE	_						
Stock Option	\$2.26	06/25/2012		D		481,164		(1)		/25/2012	Common	481,16	,	\$2.26	218,71	,	D		
(right to	\$2.20	06/25/2012		٦ ا		401,104		(1)	100	/25/2012	Stock	401,10	1	\$2.20	210,/1	1	ט		
buy)				+	-		$\vdash \vdash$		+				+						
Stock Option	*0.06	06/05/0046		Ι.		404.46		(1)		/OF (DODS	Common	401.10		*2.20	404 - 5	,	_		
(right to	\$2.26	06/25/2012		A		481,164		(1)	106	5/25/2022	Stock	481,16	+	\$2.26	481,16	04	D		
buy)							ıl											1	

Explanation of Responses:

1. On June 25, 2012, the unvested shares of an option granted to the reporting person on March 21, 2011 were cancelled. In exchange, the reporting person received a replacement option, granted on June 25, 2012, vesting in eleven equal quarterly installments commencing on September 21, 2012.

/s/ Timothy M. Mayleben

06/26/2012

** 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.