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 OF SECURITIES

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

(Print or Typ	e Responses)																
1. Name and Address of Reporting Person* Wheeler Jonathan H.				2. Issuer Name and Ticker or Trading Symbol CRYO CELL INTERNATIONAL INC [CCEL]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
700 BROOKER CREEK BLVD., SUITE 1800				3. Date of Earliest Transaction (Month/Day/Year) 06/12/2020							(Officer (give	title below)	Othe	r (specify belo	w)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person							
OLDSMAR, FL 34677 (City) (State) (Zip)											nired, Disposed of, or Beneficially Owned							
		(Suite)		1								•	<u> </u>					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			2A. Deemed Execution Date, if any (Month/Day/Year)		Co (In	Code		(A) or	Securities Acqui A) or Disposed of nstr. 3, 4 and 5)				ecurities Beneficially ing Reported		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
				·				Code	V	Amou	(A) or (D)	Price		,		(or Indirect (I) (Instr. 4)	(Instr. 4)
Common stock 06			06/12/2020				P		6,700	0 A	\$ 7.77	71,70	00			D		
1. Title of	2.	3. Transaction	Table II		ıts, c			Acquired ints, opti	l, Disp ions, c	osed onver	of, or Benefitible securi	ficially ties)	Owne		8. Price of	9. Number o	f 10.	11. Natur
Derivative Security (Instr. 3)	Conversion		Execution Date, if	Transac Code	tion		ative ities red sed	6. Date Exercisable and Expiration Date (Month/Day/Year)			of U Seco	of Underlying		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Owners Form of Derivat Security Direct (or Indir	hip of Indirect Beneficial Ownersh (Instr. 4)	
				Code	V	(A)	(D)	Date Exercis	able		Expiration Date	Title	e	Amount or Number of Shares				
Common Stock	\$ 2.04							07/10/	/2012	2(1)	07/10/2022	<i>!</i> .	mmon tock	7,500		7,500	D	
Common Stock	\$ 1.95							07/19/	/2013	(<u>2</u>)	07/19/2023) I	mmon tock	7,500		7,500	D	
Common Stock	\$ 2.4							07/22	/2014	(3)	07/22/2024	+ 1	mmon tock	7,500		7,500	D	
Common Stock	\$ 3.08							07/09/	/2015	(<u>4)</u>	07/09/2025		mmon tock	7,500		7,500	D	
Stock Option	\$ 7.53							08/30/	/2019	(<u>5)</u>	08/30/2029		mmon tock	7,500		7,500	D	
Stock Option	\$ 7.74							11/25/	/2019	<u>(6)</u> 1	1/25/2026		mmon tock	5,300		5,300	D	

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Wheeler Jonathan H. 700 BROOKER CREEK BLVD., SUITE 1800 OLDSMAR, FL 34677	X					

Signatures

/s/ Jonathan Wheeler	06/16/2020
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) Stock options vest at a rate of 1/12 per month commencing on July 10, 2012.
- (2) Stock options vest at a rate of 1/12 per month commencing on July 19, 2013.
- (3) Stock options vest at a rate of 1/12 per month commencing on July 22, 2014.
- (4) Stock options vest at a rate of 1/12 per month commencing on July 9, 2015.
- (5) Stock options vest at a rate of 1/12 per month commencing on August 30, 2019.
- (6) Stock options vest at a rate of 1/12 per month commencing on November 25, 2019.

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.