

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 * <u>Westbury Trust</u>  (Last) (First) (Middle) <u>11 VICTORIA STREET, P.O. BOX HM 1065</u>  (Street) <u>HAMILTON</u> <u>D0</u> <u>HMEX</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>BioRestorative Therapies, Inc. [ BRTX ]</u>  3. Date of Earliest Transaction (Month/Day/Year) <u>02/20/2015</u>  4. If Amendment, Date of Original Filed (Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director <u>X</u> 10% Owner Officer (give title below) Other (specify below)  6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <u>X</u> Form filed by More than One Reporting Person
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Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/20/2015		P		1,000,000	A	(1)	4,115,000	I	See footnote <sup>(2)</sup>

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Common Stock Warrants (right to buy)	\$0.75	02/20/2015		P		250,000		(3)	02/20/2020	Common Stock	250,000	(1)	250,000	I	See footnote <sup>(2)</sup>

1. Name and Address of Reporting Person * <u>Westbury Trust</u>  (Last) (First) (Middle) <u>11 VICTORIA STREET, P.O. BOX HM 1065</u>  (Street) <u>HAMILTON</u> <u>D0</u> <u>HMEX</u>  (City) (State) (Zip)	1. Name and Address of Reporting Person * <u>WESTBURY BERMUDA LTD</u>  (Last) (First) (Middle) <u>11 VICTORIA STREET, P.O. BOX HM 1065</u>  (Street) <u>HAMILTON</u> <u>D0</u> <u>HMEX</u>  (City) (State) (Zip)
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Explanation of Responses:

1. On February 20, 2015, Westbury (Bermuda) Ltd. ("Westbury") purchased 1,000,000 shares of common stock of BioRestorative Therapies, Inc. (the "Issuer") and warrants to purchase 250,000 shares of common stock of the Issuer in a transaction directly with the Issuer for total consideration of \$300,000.
2. These securities are directly owned by Westbury, which is 100% owned by Westbury Trust. Westbury Trust is an indirect beneficial owner of the reported securities.
3. The warrants were exercisable immediately upon issuance.

Remarks:

WESTBURY TRUST, Name: Jim Watt, Title: Trustee /s/ Jim Watt 02/24/2015  
WESTBURY (BERMUDA) LTD., Name: Jim Watt, Title: President /s/ Jim Watt 02/24/2015

\*\* 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.**

Form 4 Joint Filer Information

Name: Westbury (Bermuda) Ltd.

Address: 11 Victoria Street,  
P.O. Box HM 1065  
Hamilton, HMEX Bermuda

Date of Event Requiring Statement: 2/20/2015