Bellerophon Therapeutics, Inc.

Form 3

May 04, 2016

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

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

response...

January 31, 2005

0.5

Estimated average burden hours per

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

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)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement Bellerophon Therapeutics, Inc. [BLPH] A Shah Parag Suresh (Month/Day/Year) 04/06/2016 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O BELLEROPHON (Check all applicable) THERAPEUTICS, INC., 184 LIBERTY CORNER ROAD, 10% Owner Director **SUITE 302** \_X\_\_ Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group VP Proj Mgmt & Distribution Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person WARREN, NJÂ 07059 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) (Instr. 5) Form: Direct (D) or Indirect (Instr. 5) Â Common Stock 13,554 D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly.

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 control number.

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)

#### Edgar Filing: Bellerophon Therapeutics, Inc. - Form 3

	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Option (right to buy)	(1)	06/20/2024	Common Stock	3,991	\$ 13.28	D	Â
Stock Option (right to buy)	(2)	02/13/2025	Common Stock	1,995	\$ 12	D	Â
Stock Option (right to buy)	(3)	03/12/2025	Common Stock	4,368	\$ 10.22	D	Â

# **Reporting Owners**

Reporting Owner Name / Address		Relationships				
r	Director	10% Owner	Officer	Other		
Shah Parag Suresh C/O BELLEROPHON THERAPEUTICS, INC. 184 LIBERTY CORNER ROAD, SUITE 302 WARREN, NJ 07059	Â	Â	VP Proj Mgmt & Distribution	Â		

### **Signatures**

/s/ Parag Shah	05/04/2016		
**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).
- (1) This option was granted on June 20, 2014. This option vests as to 25% of the underlying shares on each of the second and third anniversaries of the date of grant and 50% on the fourth anniversary of the date of grant.
- (2) This option was granted on February 13, 2015. This option vests as to 25% of the underlying shares on each one year anniversary of the date of grant.
- (3) This option vested as to 25% of the underlying shares on March 13, 2015 (the "Vesting Commencement Date") and vests as to an additional 25% of the underlying shares on each of the first, second and third anniversaries of the Vesting Commencement Date.

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.

Reporting Owners 2