FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Teufel Crispin (N			Date of Event equiring Staten Month/Day/Year 3/18/2019	nent	3. Issuer Name and Ticker or Trading Symbol Bellerophon Therapeutics, Inc. [BLPH]							
(Last) 19387 US 191	(First)	(Middle)	_ 33.13/2313			ationship of Reporting Perso call applicable) Director	son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street)					Director Officer (give title below)	Other (spe below)		Individual or Joint/Group Filing (Check Applicable Line) Y Form filed by One Reporting Person Form filed by More than One				
(City)	(State)	(Zip)								Reporting Pé	erson	
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
Expiration			Expiration Da	Date Exercisable and xpiration Date Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securit		4. Convers	sion (5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	ı Title	9	Amount or Number of Shares	Price of Derivativ Security	ve	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Crispin Teufel 03/27/2019

** Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$

- * 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).

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.