FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CH	HANGES	IN BEN	IEFICIAL	OWNER	SHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Dekker Martin				2. Issuer Name and Ticker or Trading Symbol Bellerophon Therapeutics, Inc. [BLPH]									Check	all app	olicable)			o Issuer 6 Owner er (specify		
(Last) (First) (Middle) C/O BELLEROPHON THERAPEUTICS, INC. 184 LIBERTY CORNER ROAD, SUITE 302				3. Date of Earliest Transaction (Month/Day/Year) 09/12/2016									X	belov	below) below) VP of Device Engineering			`		
(Street) WARREN NJ 07059 (City) (State) (Zip)			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
		Tabl	e I - Noi	า-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Transaction Disposed Of (D) Code (Instr. 5)		s Acquired (A) or If (D) (Instr. 3, 4 an		and Securities Beneficial		ties cially I Following	6. Owner Form: D (D) or Ir (I) (Instr	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
								Code	v	Amount		(A) or (D)	Price	、 l	Transa	rsaction(s) tr. 3 and 4)			(mou. 4)	
Common Stock 09/12			09/12	/12/2016				F		13,33	33 D \$		\$1.	.38	23,181		Ι)		
	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)	Derivative Conversion Date Execution Date Security or Exercise (Month/Day/Year) if any		Date,	Transaction Of Code (Instr. 8) Se Ac (A) Dis			ative rities ired osed	6. Date Exercis Expiration Date (Month/Day/Yea		e Amo Secu Unde Deriv Secu		Amount of Securities		8. Pri Deriv Secu (Instr	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owi Fori Dire or II (I) (I	nership m: ect (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Remarks:

/s/ Martin Dekker

09/13/2016

** 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.