FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

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*  Bruder Scott P						2. Issuer Name <b>and</b> Ticker or Trading Symbol Bellerophon Therapeutics, Inc. [ BLPH ]									neck all ap	oplicable) ector	ng Person(s) to I	Owner
(Last) (First) (Middle) C/O BELLEROPHON THERAPEUTICS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 04/28/2016									Offi bel	cer (give title ow)	Other below	(specify )	
184 LIBERTY CORNER ROAD, SUITE 302					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) WARRE	Street) WARREN NJ 07059														X Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City)	(St	ate) (	Zip)															
		Tabl	e I - Non	-Deriva	ative	Sec	curitie	s Acq	uired,	Dis	posed o	f, or	Bene	ficia	ly Owr	ied		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					th/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)					Secu Bene Own	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Price	Repo Trans (Insti	saction(s) :. 3 and 4)		(Instr. 4)
Common Stock 04/28/					3/2016				A		18,692		A	\$0	18,692		D	
		Та	ıble II - D (e								sed of, onvertib				Owne	k		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/	Date,	Date, Transaction Code (Inst				6. Date E: Expiratio (Month/D	n Date	Amount of			3. Price of Derivative Security (Instr. 5)	derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber				

**Explanation of Responses:** 

Remarks:

/s/ Scott Bruder

04/29/2016

\*\* 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.