## Edgar Filing: CAPRICOR THERAPEUTICS, INC. - Form 5

CAPRICOR THERAPEUTICS, INC. Form 5 Februa FO

Form 5 February 16,	2016										
FORM								OMB AI	PPROVAL		
Check this no longer s	UNITED S	STATES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 CATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section					OMB Number: Expires:	3235-0362 January 31,	,	
to Section Form 4 or 5 obligatio may contir <i>See</i> Instruc 1(b).	16. ANN Form ANN ns nue. ction Filed pur	suant to S						Estimated a burden hou response	•		
Reported Form 4 Transaction Reported					ompany Act o						
1. Name and Address of Reporting Person <u>*</u> Marban Linda			2. Issuer Name <b>and</b> Ticker or Trading Symbol CAPRICOR THERAPEUTICS, INC. [CAPR]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	COR THERAPE ) WILSHIRE BL		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015				_X_ Director _X_ Officer (give below)		o Owner er (specify		
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Reporting (check applicable line)				
BEVERLY	HILLS, CA 9	0211					_X_ Form Filed by Form Filed by M Person	One Reporting Po More than One R			
(City)	(State)	(Zip)	Table	e I - Non-Deri	vative Securitie	es Acqu	ired, Disposed of	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	med on Date, if Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) of Disposed of (E (Instr. 3, 4 and (A) or Amount (D)	D) I 5)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		

				Amount	(D)	Price	(		
Common Stock	12/16/2015	Â	G	5,000	D	\$0	263,557	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	3,173,354 (1)	I	By spouse.

Reminder: Report on a separate line for each class of securities beneficially 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.

SEC 2270 (9-02)

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 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)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. of D So B O E I S Fi (I
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Nan	Relationships						
i o	Director	10% Owner	Officer	Other			
Marban Linda C/O CAPRICOR THERA 8840 WILSHIRE BLVD., BEVERLY HILLS, CA	ÂX	Â	CEO	Â			
Signatures							
/s/ Linda Marban	02/16/2016						
**Signature of Reporting Person	Date						

## **Explanation of Responses:**

- \* 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).

The Reporting Person disclaims beneficial ownership of these securities, other than over 9,200 shares held in joint tenancy with her spouse, in that she has no power to vote or to direct the voting of these securities, nor does she have the power to dispose of or to direct

spouse, in that she has no power to vote of to uncer the voting of these securities, nor does she have the power to unpose of or to uncer the voting of these securities.
 the disposition of these securities. This report shall not be deemed a disclaimer of any community interest of the Reporting Person in such securities.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.