FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* COLLIER EARL M JR					2. Issuer Name and Ticker or Trading Symbol CAPRICOR THERAPEUTICS, INC. [CAPR]									ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner				/ner
(Last)	(First)	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/03/2017									Officer (g below)	ve title		Other (s below)	pecify
C/O CAPRICOR THERAPEUTICS, INC. 8840 WILSHIRE BLVD., 2ND FLOOR					4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) BEVERLY HILLS CA 90211 (City) (State) (Zip)														Form filed by More than One Reporting Person				
		Т	able I - Non	-Deriv	ative	Securiti	es Acc	quired, I	Disp	osed of	, or Bene	ficiall	ly Ow	ned				
Date					action Day/Year	Execution if any	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr.		ties Acquired (A) or d Of (D) (Instr. 3, 4 and 5		ıd 5)	5. Amount Securities Beneficially Following I	y Owned or In Reported (Ins			7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A) or (D)			Transaction(s) (Instr. 3 and 4)				
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		3A. Deemed Execution Date, if any (Month/Day/Year	Cod	nsaction le (Instr.	Derivati Securiti Acquire or Dispo	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		ng	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	le V	(A)		Date Exercisabl		Expiration Date	Title	or Num	ount nber shares		(Instr. 4)			
Stock Option (right to buy)	\$2.55	01/03/2017		A		28,560		01/03/2017	(1) 0	01/03/2027	Common Stock	28	,560	\$0	28,560)	D	

Explanation of Responses:

1. 8,560 of the shares will vest 1/48th on the first day of each month, commencing February 1, 2017, until the stock option becomes fully vested and exercisable. The remaining 20,000 shares will vest 1/12 on the first day of each month, commencing February 1, 2017, with the last month vesting on December 31, 2017. However, the option is subject to early exercise and, therefore, all or any part of the option can be exercised at any time. If the reporting person elects to take advantage of the early exercise feature and purchase shares prior to the vesting of such shares, the shares will be deemed restricted stock and will be subject to a repurchase option in favor of the Registrant terminates prior to vesting.

/s/ Linda Marban, as Attorney-in-

Fact

** Signature of Reporting Person

Date

01/04/2017

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.