CAPRICOR THERAPEUTICS, INC.

Form 4

January 22, 2015

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

Section 16.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Manzo Louis

2. Issuer Name and Ticker or Trading

Symbol

CAPRICOR THERAPEUTICS,

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

INC. [CAPR]

3. Date of Earliest Transaction

X_ Director 10% Owner Officer (give title Other (specify

C/O CAPRICOR THERAPEUTICS.

(Street)

(First)

(Middle)

INC., 8840 WILSHIRE BLVD.,

2ND FLOOR

(Last)

4. If Amendment, Date Original

(Month/Day/Year)

01/21/2015

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

below)

BEVERLY HILLS, CA 90211

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Execution Date, if

(Month/Day/Year)

4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 7. Nature of Indirect Securities Ownership Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported

(A)

or

(I) Transaction(s) (Instr. 4)

(Instr. 3 and 4) Code V (D) Price Amount

Common 01/21/2015 $P^{(1)}$ 28,384 D 28,384 3.523 Stock

Common Stock

By Coniston $I^{(2)}$ 638,155 Corporation

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

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SEC 1474 (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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivative		e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities Acquired			(Instr. 3	3 and 4)		Own
	Security										Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A manuat		
									Amount		
					Date	Date	Expiration	Or Title Nesselves			
						Exercisable Date	Date		Number		
				C + V	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address Director 10% Owner Officer Other

Manzo Louis C/O CAPRICOR THERAPEUTICS, INC. 8840 WILSHIRE BLVD., 2ND FLOOR BEVERLY HILLS, CA 90211



Signatures

/s/ Linda Marban, as Attorney-in-Fact

01/22/2015

**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 entered into a Share Purchase Agreement with Capricor Therapeutics, Inc. (the "Issuer") pursuant to which **(1)** the Reporting Person, on January 21, 2015, purchased an aggregate of 28,384 shares of the Issuer's common stock at a purchase price of \$3.5230 per share for an aggregate purchase price of approximately US\$100,000.
- 638,155 shares of common stock of the Issuer are beneficially owned by Coniston Corporation. The Reporting Person is the **(2)** President of Coniston Corporation. The equity securities of Coniston Corporation are held by the Reporting Person and irrevocable trusts for the benefit of the Reporting Person's children.

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

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