FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number:	3235-0287						
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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 Ascheim Deborah					2. Issuer Name and Ticker or Trading Symbol CAPRICOR THERAPEUTICS, INC. [CAPR]									tionship of R all applicabl Director		erson((s) to Issuer 10% Ov	/ner
(Last) C/O CAPRIO	(First) (APEUTICS, INC	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/18/2015							X	Officer (g below) CHIE	ive title EF MEDICAL O		Other (s below) OFFICER	·	
8840 WILSHIRE BLVD, 2ND FLOOR				[4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street) BEVERLY HILLS CA 90211													Form filed by More than One Reporting Person					
(City)	(State		Zip)															
			able I - Nor	ı-Deriv	ative S	ecuritie	s Acq	uired, C)ispc	osed of	f, or Ben	efic	ially Ow	ned		,		
1. Title of Security (Instr. 3) 2. Tran Date (Month					ction ay/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr.		rities Acquired (A) or ed Of (D) (Instr. 3, 4 a			5. Amount Securities Beneficially Following	/ Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount (A) or (D)		Price		Transaction(s) (Instr. 3 and 4)			(Instr. 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Code (Instr.		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 Securities Underlyir Derivative Security 3 and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)		Date Exercisabl		piration te	Title	i	Amount or Number of Shares		(Instr. 4)			
Stock Option (right to buy)	\$4.34	09/18/2015		A		130,000		(1)	09/	/18/2025	Common Stock		130,000	\$0	130,00	00	D	

Explanation of Responses:

1. 25% of the shares subject to the stock option award shall vest on September 1, 2016 and the balance shall vest at the rate of 1/36 per month on the first day of each month thereafter, until the stock option becomes fully vested and exercisable. 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 if the Reporting Person's service to the Registrant terminates prior to vesting.

/s/ Linda Marban, as Attorney-in-

<u>Fact</u>

** Signature of Reporting Person

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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.