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).
\cup	or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* DAVIS STEPHEN					2. Issuer Name and Ticker or Trading Symbol BELLICUM PHARMACEUTICALS, INC [BLCM]						5. Relation (Check all	ship of Reporting Popplicable) Director	erson(s) to I	Issuer	10% Own	er	
(Last) (First) (Middle) C/O BELLICUM PHARMACEUTICALS, INC. 2130 W. HOLCOMBE BLVD., STE. 800					3. Date of Earliest Transaction (Month/Day/Year) 06/14/2017								Officer (give title	below)		Other (spe	ecify below)
(Street) HOUSTON TX 77030 (City) (State) (Zip)			If Amendment, Date of Original Filed (Month/Day/Year)							6. Individua X	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
			T	able I - I	Non-Deri	vative Sec	urities Ac	quired, Di	sposed o	f, or Bene	ficially Ow	ned					
1. Title of Security (Instr. 3)				Date Exe		Execution Date, C		3. Transaction 4. Securi Code (Instr. 8) 3, 4 and		urities Acquired (A) or Disposed Of (I d 5)		Amount of Securities neficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial	
						(ear) if any (Month/Day/Year)		Amount	t	(A) or (D)		eported Transaction(s) (Instr nstr. 3 and 4)		Instr. 4)		Ownership (Instr. 4)	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Title of Derivative Security (Instr. 3)	erivative Security (Instr. 2. Conversion or Exercise Price of Derivative Security 3. Tra			4. Transaction Code (Instr. 8)		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 Derivative Security (Instr. 3 and 4			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following	Foi (D)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	A) (D)		Date Expiration Date				unt or per of Shares		on(s)		
Stock Option (right to buy)	\$10.34	06/14/2017		A		10,000		(1)	06/13/2027	Comn	non Stock	10,000	\$0	10,000	0	D	

Remarks:

/s/ Ken Moseley, Attorny-in-Fact
** Signature of Reporting Person

06/15/2017 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.

Explanation of Responses:

^{1.} The shares subject to the option vest and become exercisable in equal monthly installments until the Issuer's 2018 Annual Meeting of stockholders.

POWER OF ATTORNEY

OF ATTORNEY

Know all, by these presents, that the undersigned hereby constitutes and appoints each of Ken Moseley and Alan Musso, signing individually, the undersigned's 1

(1) execute for and on behalf of the undersigned, an officer, director or holder of 10% of more of a registered class of securities of Bellicum Pharmaceuticals

(2) do and perform any and all acts for and on behalf of the undersigned that may be necessary or desirable to complete and execute such Form 3, 4 or 5, comple

(3) take any other action of any nature whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit, in the 1

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necess

This Power of Attorney shall remain in full force and effect until the earliest to occur of (a) the undersigned is no longer required to file Forms 3, 4 and 5

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 13 day of July, 2015.

/s/ Stephen R. Davis (Signature) Stephen R. Davis (Print Name)

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