FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Smith Alan K.						2. Issuer Name and Ticker or Trading Symbol BELLICUM PHARMACEUTICALS, INC [BLCM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				/ner
(Last) (First) (Middle) C/O BELLICUM PHARMACEUTICALS, INC. 2130 W. HOLCOMBE BLVD., STE. 800				Ξ.	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2018									X Officer (give title Offier (specify below) EVP, Technical Operations				
(Street) HOUSTON TX 77030 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)				ection	ur) i	2A. Deemed Execution Date, if any (Month/Day/Year		3. Transacti Code (Ins	on	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or	5. Amou Securitie Beneficia Owned F	nt of s ally following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code V		Amount	(A) or (D)	Price	Reported 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 D if any (Month/Day/	ate, Tr	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable a Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				C	ode V	v	(A)	(D)	Date Exercisable	Ex Da	piration te	Title	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$9.23	01/02/2018			A		16,875		(1)	01/	/01/2028	Common Stock	16,875	\$0	16,87	5	D	
Restricted Stock	(2)	01/02/2018			A		9,375		(3)		(3)	Common Stock	9,375	\$0	9,375	5	D	

Explanation of Responses:

- 1. 25% of the shares subject to the stock option vest and become exercisable on January 2, 2019, and the remaining shares subject to the stock option vest and become exercisable in 36 equal monthly installments thereafter.
- 2. Each restricted stock unit represents a contingent right to receive one share of the Issuer's common stock.
- 3. The restricted stock units vest in four equal annual installments beginning on January 2, 2019.

Remarks:

/s/ Alan K. Smith, Ph.D.

01/04/2018

** Signature of Reporting Person

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.