SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Cleaver Heath</u>			2. Date of Eve Requiring Sta (Month/Day/Y	atement (ear)	3. Issuer Name and Ticker or Trading Symbol BIO-PATH HOLDINGS INC [BPTH]					
(Last) 4010 BALS (Street) SPRING (City)	(First) SAM FIR LN TX (State)	(Middle) 77386 (Zip)	02/11/2014		4. Relationship of Reporting Per (Check all applicable) X Director Officer (give title below)	erson(s) to to 10% Ow Other (specifical)	ner	(Mor	nth/Day/Year) dividual or Joir icable Line) Form filed b Person	Date of Original Filed ont/Group Filing (Check by One Reporting by More than One Person
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)					. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
Expi			2. Date Exerc Expiration Day/ (Month/Day/	ate	3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4)			rcise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivat Securit	ive	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

No securities are beneficially owned.

<u>/s/ Heath Cleaver</u> <u>02/13/2014</u>

** Signature of Reporting Person Date

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).