FORM 3

(Print or Type Responses) 1. Name and Address of

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB 3235-Number: 0104 November Expires: 30, 2011 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP **OF SECURITIES**

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

3. Issuer Name and Ticker or Trading Symbol

2. Date of Event

Reporting Person * PIETRANGELO MICHAEL	Requiring Statement (Month/Day/Year) 02/27/2012		MRI INTERVENTIONS, INC. [NONE]							
(Last) (First) C/O MRI INTERVENTIONS INC., ONE COMMI SQUARE, SUITE 2			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director 10% Owner Officer (give title below) (specify below)			e) r	5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) MEMPHIS, TN 381	103							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State)	(Zip)	Table I	- Non-De	rivativ	e Se	curiti	es B	eneficiall	y Owned	
1.Title of Security (Instr. 4)	Sec Ow	2. Amount of Securities Beneficially Owned (Instr. 4)		Form Direc	ership : t (D) direct	(Instr. 5)				
Common Stock			48,263			D				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4) 2. Date Expiration (Month/Day/Y		Date Secur Deriva (Instr.		e and Amount of ties Underlying tive Security 4)		4. Conversion or Exercise Price of		5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amou Numb Share	er of	Derivative Security		Direct (D) or Indirect (I) (Instr. 5)	(mou. <i>0)</i>	
Warrants (right to	(1)	00/14/2012	Commor	25.00	20	<u>ቀ</u> ለ ለ-	1	D		

buy)		09/14/2013		25,000	φ υ.υ ι	ם	
Option (right to buy)	<u>(2)</u>	12/13/2020	Common Stock	38,000	\$ 1.8	D	
Option (right to buy)	<u>(3)</u>	12/13/2020	Common Stock	12,000	\$ 1.8	D	

Reporting Owners

Reporting Owner Name / Address		Relationships					
neporting Owner Name / Address	Director	10% Owner	Officer	Other			
PIETRANGELO MICHAEL C/O MRI INTERVENTIONS, INC. ONE COMMERCE SQUARE, SUITE 2550 MEMPHIS, TN 38103	Х						

Signatures

/s/ Oscar Thomas, by power of attorney for Michael A. Pietrangelo	02/27/2012
-Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) The shares subject to this warrant are immediately exercisable.
 - One-third of the shares subject to this option vested on the first anniversary of the grant date, December 13,
- (2) 2011. The remaining shares subject to this option vest ratably on the second and third anniversaries of the grant date, December 13, 2012 and December 13, 2013.
 - The shares subject to this option vest ratably on the first, second and third anniversaries of the grant date,
- (3) December 13, 2011, December 13, 2012 and December 13, 2013, provided that no shares vest until such time as the company closes a target equity financing, which is defined as one or more equity financing transactions that results in cumulative gross proceeds of at least \$10 million.

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.