FORM 4	
Check this box if no	

longer subject to Section 16. Form 4 or

Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

N	OMB	APPROVA	L
	OMB	3	235
	Number:	C)287
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	response	ə	0.5

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

(Print or Type Respon	nses)										
1. Name and Address Pizzo Philip A.	n [*] 2. Issuer Na Symbol MRI INTE [MRIC]				U	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_ Director 10% Owner Officer (give title Other (specify below)					
(Last) (1) C/O MRI INTER INC., ONE COM STE 2550	3. Date of Ea (Month/Day/ E, 12/31/2013	Year)	ısac	tion		below)					
(S MEMPHIS, TN 3	4. If Amendn Filed(Month/D	· ·	e Or	iginal		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) (Table I -	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any	ation Date, if Transaction Acquired (A Code Disposed of Code (Instr. 8)) (Instr. 3, 4 a		1 (A) 1 of (1	D)	5. Amount of 6. Securities Ownershi Beneficially Owned Form: Following Reported Direct (D) Transaction(s) or Indirect		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	or	Price	(Instr. 3 and 4)	(I) (Instr. 4)		
Common Stock	12/31/2013		А		2,756	A	\$ 1.33 (1)	7,790	Ι	By Philip and Margaret Pizzo Living Trust	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)	
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1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on	Numl	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)]	Deriv	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				,	Secur	rities			(Inst	r. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	r						Reported	or Indirect	
]	Dispo	osed						Transaction(s)	(I)	
					-	of (D)						(Instr. 4)	(Instr. 4)	
						(Instr									
					4	4, and	15)								
											Amount				
								Dete	E		or				
								Date Exercisable	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
Pizzo Philip A. C/O MRI INTERVENTIONS, INC. ONE COMMERCE SQUARE, STE 2550 MEMPHIS, TN 38103	Х						

Signatures

Signature of Reporting Person

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01/03/2014 Date

Explanation of Responses:

- * 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).
- These shares were issued to the reporting person pursuant to the issuer's Non-Employee Director Compensation Plan, in payment of fees (1) owed to the reporting person under such plan. The shares were issued at a price of \$1.33 per share, representing the volume-weighted average price of the issuer's common stock for the 5-trading day period ending December 31, 2013.

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.