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

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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OMB APPROVAL

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Number:

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 Respo                                  | onses)  |                               |                  |                                      |       |  |               |  |                |   |  |  |
|--|---|-------------------------------|------------------|--------------------------------------|-------|--|---------------|--|----------------|---|--|--|
| 1. Name and Addre<br>PIETRANGELC                     | 2. Issuer Name and Ticker or Trading<br>Symbol<br>MRI INTERVENTIONS, INC.<br>[MRIC] |                               |                  |                                      |       | 5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  _X_ Director   |               |  |                |   |  |  |
| (Last)<br>C/O MRI INTER<br>INC., ONE COM<br>STE 2550 | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>03/25/2014                   |                               |                  |                                      |       | below)   |               |  |                |   |  |  |
| MEMPHIS, TN  |   | 4. If Amenda<br>Filed(Month/E | e Oı             | riginal                              |       | 6. Individual or Joint/C<br>Applicable Line)<br>_X_ Form filed by One Repo<br>Form filed by More than  | orting Person |  |                |   |  |  |
| (City)   | (State) (Zip)   |                               | Table I -        | Non-Dei                              | riva  | tive Securi  | ities Acqui   | ired, Disposed of, or I  | Beneficially ( | Owned   |  |  |
| 1.Title of Security<br>(Instr. 3)                    |   | Exect<br>any                  | ,                | 3.<br>Transact<br>Code<br>(Instr. 8) | )     |  | (A) or of (D) | 5. Amount of<br>Securities<br>Beneficially Owned<br>Following Reported<br>Transaction(s)<br>(Instr. 3 and 4) | Direct (D)     | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Reminder: Report or directly or indirectly           | a separate line for e   | ach cla                       | ass of securitie | es benefic                           | ially | owned  |               |  |                |   |  |  |
|  |   |                               |                  |                                      |       | 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 Acquired, Disposed of, or Beneficially Owned  $(\textit{e.g.}, \, \text{puts}, \, \text{calls}, \, \text{warrants}, \, \text{options}, \, \text{convertible securities})$ 

| Security (Instr. 3)   | Conversion<br>or Exercise<br>Price of<br>Derivative | Date<br>(Month/Day/Year) | Execution Date, if | Code | ion<br>) | of<br>Derivativ<br>Securitie<br>Acquired         | of Expiration Date Derivative (Month/Day/Year) Securities Acquired |               | Securities         |                 | Derivative<br>Security<br>(Instr. 5)   | Derivative<br>Securities<br>Beneficially<br>Owned | Ownership<br>Form of<br>Derivative<br>Security: | Beneficial                                     |  |   |
|-----------------------|---|--------------------------|--------------------|------|----------|--|--|---------------|--------------------|-----------------|--|---|---|--|--|---|
|                       | Security  |                          |                    |      |          | (A) or<br>Dispose<br>(D)<br>(Instr. 3,<br>and 5) |  |               |                    |                 |  |   | Reported<br>Transaction(s)                      | Direct (D)<br>or Indirect<br>(I)<br>(Instr. 4) |  | 1 |
|                       |   |                          |                    | Code | v        | (A)  |  | Exercisable   | Expiration<br>Date | Title           | Amount<br>or<br>Number<br>of<br>Shares |   |   |  |  | 1 |
| Warrants<br>(right to | \$ 1.75   | 03/25/2014               |                    | P    |          | 30,000   |  | 03/25/2014(1) | 03/25/2019         | Common<br>Stock | 30,000                                 | <u>(2)</u>  | 30,000  | D  |  |   |

# **Reporting Owners**

| Donouting Orymon Name / Address  | Relationships |           |         |       |  |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|--|
| Reporting Owner Name / Address   | Director      | 10% Owner | Officer | Other |  |  |  |  |
| PIETRANGELO MICHAEL<br>C/O MRI INTERVENTIONS, INC.<br>ONE COMMERCE SQUARE, STE 2550<br>MEMPHIS, TN 38103 | X             |           |         |       |  |  |  |  |

# **Signatures**

| /s/ Oscar Thomas, by Power of Attorney for Michael Pietrangelo | 03/26/2014 |
|--|------------|
| Signature of Reporting Person                                  | 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).
- (1) The shares subject to this warrant are immediately exercisable.

The reported securities are included within a unit purchased for an aggregate purchase price of \$100,000. The unit consists of a 12% (2) second priority secured non-convertible promissory note due 2019 in the principal amount of \$100,000 and warrants to purchase 30,000 shares of common stock (0.3 share of common stock for each dollar in principal amount of the note).

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.