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

(Print or Type Respo	onses)								
Name and Addres PIETRANGELC	ss of Reporting Perso MICHAEL	2. Issuer N Symbol MRI INTE [MRIC]		ker or Trading	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_Director				
C/O MRI INTER	(First) (Middle EVENTIONS, IMERCE SQUAR	(Month/Day	/Year)	ction	below)				
MEMPHIS, TN	(Street) 38103	4. If Amenda Filed(Month/I	,	riginal	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 -	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Natur Ownership Form: Benefici Direct (D) Owners or Indirect (I) (Instr. 4)			
Reminder: Report or directly or indirectly	n a separate line for e	ach class of securiti	es beneficiall	y owned					
			in re	formation contain	and to the collection led in this form are i d unless the form di 3 control number.	not (9-			
	Table II - I	Derivative Securiti	es Acquired	, Disposed of, or Ber	neficially Owned				

$(\emph{e.g.}, \textbf{puts}, \textbf{calls}, \textbf{warrants}, \textbf{options}, \textbf{convertible} \ \textbf{securities})$

	(e.g., puts, cans, warrants, options, convertible securities)														
1. Title o			3A. Deemed	4.		5. Numb		6. Date Exe					9. Number of		11. Nature
Derivati	e Conversion	Date	Execution Date, if	Transaction		of		Expiration I)ate	of Underlyi	ng	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code Derivative		ve	(Month/Day/Year) Secur		Securities Securit		Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securitie	es			(Instr. 3 and	14)	(Instr. 5)	Beneficially	Derivative	Ownership
, ,	Derivative		,	,	Acquired			ì i		` ′	Owned	Security:	(Instr. 4)		
	Security					(A) or						Following	Direct (D)	, , ,	
	Security					Dispose	d of					or Indirect			
						(D)	u oi				Transaction(s)				
						` /	4				` '				
						(Instr. 3, 4,				(Instr. 4)	(Instr. 4)				
						and 5)									
											Amount				
								_			or				
									Expiration	Title	Number				
								Exercisable	Date	Title	of				
				Code	17	(A)	(D)				Shares				
				Code	v	(A)	(D)				Shares				
Stock															
Option	2									Common					
	1 NUX	06/04/2014		Α		20,000		<u>(1)</u>	06/04/2024	Common	20,000	\$0	20,000	D	
(right t	0									Stock					
buy)															

Reporting Owners

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

Signatures

/s/ Oscar Thomas, by Power of Attorney for Michael A. Pietrangelo	06/05/2014
-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 option will vest in full on the earlier of (i) June 4, 2015, or (ii) the day immediately preceding the Company's 2015 annual meeting of stockholders, pursuant to the terms of the Company's Non-Employee Director Compensation Plan.

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.