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

OMB APPRO	OVAL								
OMB Number:	3235-0287								
Estimated average burden									
hours por rosponso	0.5								

STATEMENT OF CHANGES IN 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

(Print or Ty	pe Response	es)																		
1. Name and Address of Reporting Person – Richards Timothy T.						2. Issuer Name and Ticker or Trading Symbol MRI INTERVENTIONS, INC. [MRIC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O MRI INTERVENTIONS, INC., 5 MUSICK						3. Date of Earliest Transaction (Month/Day/Year) 06/05/2015									Officer (give title below) Other (specify below)					
(Street)						4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) X Form filed by One Reporting Person						
IRVINE, CA 92618													Form filed by More than One Reporting Person							
(Cit	y)	(State)	(Zip)				Ta	ble I -	Non-Deri	iva	tive Securities	Acqui	red, I	Disposed	l of, or Ben	eficially Owi	ned			
(Instr. 3)			2. Transaction Date (Month/Day/Y		2A. Deemed Execution Date any (Month/Day/Y			3. Trar Code (Instr.	8)	(A) or Disp (Instr. 3, 4		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			ed (6. 7. Nature Ownership of Indirect Form: Beneficial Direct (D) or Indirect (I) (Instr. 4)			
Reminder:	Report on a	separate line for ea							Perso conta form	ns ine dis	y. who respored in this for plays a curred of, or Bender	m are ently v	not re /alid (equired OMB co	to respo	nd unless tl		74 (9-02)		
			Table								vertible secur		Own	eu						
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, is any (Month/Day/Year		Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title Amour Under Securi (Instr.	nt of lying ties	4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	Code V		(D)	Date Exercisal	ble	Expiration Date	Title	1	Amount or Number of Shares						
Stock Options (right to buy)	\$ 1.04	06/05/2015			A		20,00	00	(1)		06/05/2025	Comr		20,000	\$ 0	20,000	D			
Repoi	rting O	wners																		
			R	elati	onships			1												
Reporting Owner Name / Address					Owner Officer Other			r												
Richards Timothy T. C/O MRI INTERVENTIONS, INC. 5 MUSICK IRVINE, CA 92618																				
Signa	tures																			
/s/ Richa	rd F. Matte	ern, by Power of	Attorney for	Tim	othy T.	Ric	chards		06	/09	0/2015									
		**Signature of R	eporting Person							Da	nte									

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 5, 2016, or (ii) the day immediately preceding the Company's 2016 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.