FORM 4	ŀ
--------	---

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 APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

02)

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 Type Responses	5)										
1. Name and Address of KOOB CHARLES I	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				
C/O MRI INTERVE	(First) ENTIONS, I	(Middle) NC., 5 MUSICK	3. Date of Earliest Transaction (Month/Day/Year) 10/04/2017					Officer (give title below) Other (specify below)			
IRVINE,, CA 92618	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 Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if			4. Securi (A) or D (Instr. 3, Amount	4 and (A) or	l of (D)	Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)	Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock		10/04/2017		А		2,729		\$ 2.47 <u>(1)</u>	22,902	D	
Common Stock									3,850	Ι	By Koob Family Trust

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

Persons who respond to the collection of information SEC 1474 (9contained 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

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)													
1. Title of	2.	3. Transaction	3A. Deemed	4.	5. N	umber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of		and Expiration Date		Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	Der	ivative	(Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Secu	urities			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Acq	uired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A)	or			4)			Following	Direct (D)	
					Disp	oosed						Reported	or Indirect	
					of (l	D)						Transaction(s)	(I)	
					(Ins	tr. 3,						(Instr. 4)	(Instr. 4)	
					4, ai	1d 5)								
										Amount				
							Date	Expiration		or				
								xercisable Date	Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

Reporting Owners

Describer Oren News (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
KOOB CHARLES E C/O MRI INTERVENTIONS, INC. 5 MUSICK IRVINE,, CA 92618	Х							

Signatures

/s/ Richard F. Mattern, by Power of Attorney for Charles E. Koob	10/05/2017
**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).

These shares were issued pursuant to the issuer's Second Amended and Restated 2013 Incentive Compensation Plan, in payment of fees owed to the reporting person under

(1) the issuer's Non-Employee Director Compensation Plan, as amended and restated. The shares were issued at a price of \$2.47 per share, representing the volume-weighted average price of the issuer's common stock for the five-trading day period ended September 29, 2017.

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.