## FORM 4

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

OMB APPRO	JVAL
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Check this box if no 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

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														
1. Name and Address of Reporting Person* FLETCHER R JOHN				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) 06/07/2019						Officer (giv	e title below)	Othe	(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 _Form filed by More than One Reporting Person				
IRVINE, CA 92618 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu				s Acquire	uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Data any (Month/Day/Y		3. Tra Code (Instr.	nsaction 4.	Securities Acqual or Disposed constr. 3, 4 and 5)	uired 5. A	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		. 7. Ownership of Borm: Bo	Nature f Indirect eneficial wnership nstr. 4)			
						Coo	de V A	mount (A) of	Price			,	Instr. 4)	
Reminder:	report on a						in this f	s who respon orm are not r	equired to	respond	unless the		ed SEC 14	74 (9-02)
Reminder:	•	3. Transaction	Table II -			arrants	in this f displays uired, Dispo	orm are not re s a currently v sed of, or Bene nvertible secur	equired to valid OME eficially Ov ities)	o respond 3 control r	unless the			74 (9-02)
1. Title of	2. Conversion	3. Transaction		4. Transac Code	5. Nu 5. Nu 6 Secur 7 Acquir 8 of (D) 9 (Instr	mber rivative ities red (A) posed	in this f displays uired, Dispo , options, co 6. Date Exe Expiration 1 (Month/Day	orm are not rest a currently vested of, or Bene exertible securicisable and Date	equired to valid OME eficially Ov ities)	o respond 3 control r vned ad Amount ying	unless the number.	9. Number of Derivative Securities Beneficially Owned Following Reported	To 10.  Ownership Form of Derivative Security:  Direct (D) or Indirect	11. Natu of Indire Benefici Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deemed Execution Date, if any	4. Transac Code	5. Nu of De Secur Acqui or Dis of (D	mber rivative ities red (A) posed 3, 4,	in this f displays uired, Dispo , options, co 6. Date Exe Expiration 1 (Month/Day	sed of, or Beneavertible secur rcisable and Date //Year)	equired to valid OME eficially Ovities)  7. Title ar of Underly Securities	o respond 3 control r vned ad Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following	To 10.  Ownership Form of Derivative Security:  Direct (D) or Indirect	11. Natu of Indire Benefici Ownersh (Instr. 4)

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
FLETCHER R JOHN C/O MRI INTERVENTIONS, INC. 5 MUSICK IRVINE, CA 92618	X				

## **Signatures**

/s/ Richard F. Mattern, by Power of Attorney for R. John Fletcher	06/10/2019
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).
- The shares subject to this option will vest in full on the earlier of (i) the first anniversary of the grant date, or (ii) the day immediately preceding the Company's 2020 annual meeting of stockholders.

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.