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 0.5 hours per response..

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 * Bauerlein Alison					2. Issuer Name and Ticker or Trading Symbol Inogen Inc [INGN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
326 BOLLAY DRIVE (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 11/21/2014									X Officer (give title below) Other (specify below) EVP, Finance & CFO					
(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						
GOLETA																			
(Cit	у)	(State)	(Zip)			7	Γable I -	Non-D	erivati	ive S	Securiti	ies Acquii	red, D	isposed	l of, or Ben	eficially Ov	vned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Y			(Instr. 8]		(A) o	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	f (D) Benefici		nt of Securities ally Owned Following Transaction(s) and 4)		Ownership Form:	Beneficial Ownership		
							Code	V	Amo	unt	or (D)	Price					(I) (Instr. 4)		
Common	Stock		11/21/2014				M	·	15,6	-	` /	\$ 0.6	55,70	04			D		
Common			11/21/2014				S ⁽¹⁾		15,6		D 2	\$	40,01				D		
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transactio Date (Month/Day/	Execution Date,	Code (Instr. 8)		of Der Sect Acq (A) Disp (D)	posed of tr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amour Underly Securit	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form o y Derivat Securit Direct or India	Ownersh y: (Instr. 4) (D) ect			
				Code		(A)		Date Exerci			iration	Title	o: N	lumber					
Stock Option (right to buy)	\$ 0.6	11/21/20	14	М		()	15,687	<u>C</u>	3)	02/2	24/202	Comn Stoc	non 1	5,687	\$ 0	46,086	D		
Repoi	rting O	wners							1			•							
Reporting	Owner Nar	ne / Address		Relationshi	ips			041											
Bauerlein Alison 326 BOLLAY DRIVE			Director 10% Owner	Officer EVP, F	Other														

Signatures

GOLETA, CA 93117

/s/ Alison Bauerlein	11/24/2014
**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 sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 17, 2014.
- (2) Represents the weighted average share price of an aggregate total of 15,687 shares sold in the price range of \$24.36 to \$24.875 by the reporting person. The reporting person undertakes to provide upon request by the Commission staff, the issuer or a security holder of the issuer, full information regarding the number of shares sold at each separate price. Subject to the reporting person's continuing service, sixty percent (60%) of the shares subject to the option shall vest and become exercisable on the vesting commencement date, and thereafter, one thirtieth (1/30th) of the remaining shares subject to the option shall vest each month on the same day as the vesting commencement date, such that the shares subject

(3) to the option shall become fully vested and exercisable on the thirty (30) month anniversary of the vesting commencement date. The vesting commencement date for this option is February 24, 2010.

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.