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

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	OMB APPROVAL					
ON	OMB Number: 3235-0287					
Es	Estimated average burden					
ho	urs per respons	e 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

Huggenberger Raymond	ng Person														
326 BOLLAY DRIVE				2. Issuer Name and Ticker or Trading Symbol Inogen Inc [INGN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Stree				3. Date of Earliest Transaction (Month/Day/Year) 02/19/2015					X						
)		4. If Amend	lment,	Date Orig	inal File	d(Month/I	Day/Year)			or Joint/Gro One Reporting	up Filing(Che	k Applicable I	ine)	
GOLETA, CA 93117												Reporting Persor			
(City) (State)	(Zip)			Гable I - N	Non-Der	ivative	Securitie	s Acquired,	Disposed	of, or Ben	eficially Ow	ned		
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (Instr. 8)	(4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D) Beneficially		of Securities Owned Following ransaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
					Code	V	Amount	(A) or (D)	Price	su. 3 anu	7)			(Instr. 4)	
Common Stock	1	02/19/2015			M	2	25,722	A \$	0.6 32,	,530]	D		
Common Stock 02		02/19/2015			S ⁽¹⁾	2	25,722	D \$ 33 (2)		808]	D		
1. Title of Derivative Conversion One Exercise (Instr. 3) 2. 3. Tran Date (Month Price of Derivative Conversion One Exercise (Month One)		3A. Deemed Execution Date, i ir) any (Month/Day/Year	Code	on of Der Sec	rivative urities quired	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 an	g	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownersh Form of Derivati	Benefici Ownersl (Instr. 4)	
Security				Dis (D)	posed of				(msu. 3 an	,		Following Reported	Security Direct (I or Indire	(Instr. 4	
Security				(D)	posed of str. 3, 4,				(msu. 3 an	- '/		Following Reported	Direct (I or Indire	(Instr. 4)	
Security			Code	(D) (Ins	posed of str. 3, 4, 5)	Date Exercisa		piration	Title	Amount or Number of Shares		Following Reported Transaction(Direct (I or Indire (s) (I)	(Instr. 4)	

Signatures

Huggenberger Raymond 326 BOLLAY DRIVE

GOLETA, CA 93117

/s/ Alison Bauerlein, as Attorney-in-Fact	02/20/2015
Signature of Reporting Person	Date

X

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 14, 2014.

President and CEO

Represents the weighted average share price of an aggregate total of 25,722 shares sold in the price range of \$33.65 to \$34.04 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, twenty-five percent (25%) of the shares subject to the option shall vest and become exercisable on the one year anniversary of the vesting commencement date, and thereafter, one thirty-sixth (1/36th) of the remaining shares subject to the option shall vest each month on the same day as the vesting

(3) commencement date, such that the shares subject to the option shall become fully vested and exercisable on the fourth (4th) 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.