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

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

10% Owner Other (specify below)

5. Relationship of Reporting Person(s) to Issuer

Director

(Check all applicable)

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person\*

(Print or Type Responses)

Bauerlein Alison

### 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

2. Issuer Name and Ticker or Trading Symbol

Inogen Inc [INGN]

(Last)		(First)		3. Date of I		t Tran	sactio	on (Mon	th/Day/Y	Year)		X_ Officer (g	ive title below)		(specify belo	ow)
C/O INOGEN, INC., 326 BOLLAY DRIVE			09/01/2019							EVP, Finance, & CFO						
(Street) GOLETA, CA 93117			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						ies Acquire	ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D) B R (I	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		owing O Fo D or	or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						(	Code	V	Amount	(A) or (D)	Price	ice		(I) (Ia	nstr. 4)	
Common S	Stock		09/01/2019				A		253	A	\$ 0 3	3,477		D		
Common S	Stock		09/01/2019				F		127 (1)	D	\$ 46.37 3	3,350		D		
Common S	Stock		09/01/2019				F		103 (1)	D	\$ 46.37 3	3,247		D		
				Derivative				form ired, Dis	display	s a cui f, or Be	rrently vali	id OMB c	ontrol nun	nd unless the nber.		
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise (Month/Day/Year) Price of Derivative Security  3. Transaction Date Execution Date any (Month/Day/Year)		4. Transac Code	33) I	5.	ative ities ired resed	6. Date and Exp	Exercisa biration I Day/Ye	able Date	7. Title and of Underly Securities (Instr. 3 an	ring	8. Price of Derivative Security (Instr. 5)		Ownersh Form of Derivativ Security Direct (I or Indire (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)		
				Code	V	(A)	(D)	Date Exercisa		piration ite	Title	Amount or Number of Shares				
Restricted Stock Unit	(2)	09/01/2019	)	М		253		(3)	1	(3)	Common Stock	253	\$ 0	2,021	D	

## **Reporting Owners**

D (1 0 V /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Bauerlein Alison C/O INOGEN, INC. 326 BOLLAY DRIVE GOLETA, CA 93117			EVP, Finance, & CFO				

## **Signatures**

/s/ Alison Bauerlein	09/04/2019

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).
- (1) The reported shares were withheld to cover the Reporting Person's tax withholding liability in connection with a portion of a time-based restricted stock award that vested on September 1, 2019.
- (2) Each restricted stock unit represents a contingent right to receive one share of Inogen common stock.
- (3) 25% of the restricted stock units shall vest on September 1, 2018, and 1/16th of the restricted stock units shall vest every three months thereafter on the 1st day of the month, subject to the reporting person continuing to be a service provider through each such vesting date.

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.