FORM 4

lor

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

OMB APPROVAL						
	3 Number:	3235-028				
Estimated average burden						
hour	s per respons	e 0				

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	pe Response	es)														
1. Name and Address of Reporting Person *- Rider Heather D.			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							
(Last) (First) (Middle) C/O INOGEN, INC., 326 BOLLAY DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 10/14/2015								e title below)		er (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								
GOLE I A	, CA 9311	(State)	(Zip)			Tabl	lo I	Non Davis	rativa Sagurit	ios A ogu	ired D	ienesee	l of or Pon	oficially Over	nod	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date r) any (Month/Day/Y		3. Transa Code (Instr. 8)		8) (4. Securities Acq (A) or Disposed (Instr. 3, 4 and 5)		uired 5. Amount of Owned Follow				5. 7. Ownership of Form: Bo	eneficial wnership		
Reminder:	Report on a	separate line for each		Derivativ	e Se	curities A	Acqu	Persor contain form d	ns who responed in this foi isplays a cu	orm are rrently neficiall	not re valid C	equired OMB co	l to respo	nd unless t		74 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	(e.g., puts, calls, warrants, options, convertible securit 3. Transaction Date Execution Date, if (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (e.g., puts, calls, warrants, options, convertible securit 4. 5. Number Of Expiration Date Expiration Date (Month/Day/Year) (Code Derivative (Month/Day/Year) (Month/Day/Year) (Instr. 8) Securities Acquired		7. Titl Amou Under Secur	7. Title and			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)						
				Code	v	(A)	(D)	Date Exercisab	Expiration le Date	Title	0 N 0	Amount or Number of Shares				
Stock Option (right to buy)	\$ 43.21	10/14/2015		A		10,000		<u>(1)</u>	10/13/202	Com Sto		0,000	\$ 0	10,000	D	
•		wners	Relationshi		Oth											

D	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Rider Heather D.							
C/O INOGEN, INC.	X						
326 BOLLAY DRIVE	Λ						
GOLETA, CA 93117							

Signatures

/s/ Alison Bauerlein, as Attorney-in-Fact	10/15/2015
**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).
- Subject to reporting person's continuing to be a Service Provider (as defined in the 2014 Equity Incentive Plan), 1/12th of the total shares subject to the option shall vest monthly, (1) beginning with the first month anniversary after the vesting commencement date, but will vest fully on the date of the next Annual Meeting of the Issuer's stockholders held after the vesting commencement date. The vesting commencement date for this option is October 14, 2015.

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.