FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB Number:	3235-028
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Address of Reporting Person* JOHNSON DAVID ORRIN					2. Issuer Name and Ticker or Trading Symbol BioDrain Medical, Inc. [BIOR]									k all applic Directo	tionship of Reporting all applicable) Director		10% Ov	vner	
(Last) 2915 CC	`	First) DRIVE, SUITE 9	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/18/2013								X	below)	(give title nief Oper	Other (specify below) rating Officer		specify	
(Street)	·	I N	55121		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Ind Line)	Form filed by One Reporting Person								
(City)	(5	State)	(Zip)		Form filed by More than One Reporting Person							ing							
		Ta	able I - Non-	Deriva	tive S	ecuritie	es A	cquire	ed, C	Disp	osed	of, or	Bene	ficially	Owned				
		2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year		Co	e, Transaction Dispo		4. Secu Dispose			(A) or 3, 4 and 5)	Securities Beneficially Owned Following Reported Transportion(s)		Form	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
								Co	ode	v	Amoun	nt (A) or (D)			Price			(Instr. 4)	
Common Stock														0		D			
			Table II - D			curities Ils, war									wned		,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code	action (Instr.	Derivative Expirat			xpiration Date Se Month/Day/Year) De		7. Title and Amour Securities Underly Derivative Securit (Instr. 3 and 4)		lerlying urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e C s F ally C g (10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A) (I	(D)	Date Exercis	e Exercisable D		oiration e			nount or mber of ares		(Instr. 4)			
Stock Options (right to buy)	\$0.08							(1)	.)	08/1	13/2022	Comm Stock		000,000		1,000,	000	D	
Stock Options (right to	\$0.079	03/18/2013		A		949,368		(2)		03/1	18/2023	Comm Stock		49,368	\$0	949,3	68	D	

Explanation of Responses:

- 1. 700,000 shares vest immediately; 300,000 shares vest on 2/13/2014.
- 2. 474,684 shares vest on each of 9/18/2013 and 3/18/2014.

/s/ David O. Johnson 03/19/2013

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.