FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPROVAL										
	OMB Number:	3235-0287									
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0.5

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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

1. Name and Address of Reporting Person* <u>Herschkowitz Samuel</u>						2. Issuer Name and Ticker or Trading Symbol BioDrain Medical, Inc. [BIOR]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) (First) (Middle) 144 WILLOW STREET						3. Date of Earliest Transaction (Month/Day/Year) 05/03/2013										Officer (g pelow)	give title		Other below)	(specify	
(Street) BROOKLYN NY 11201 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark>	'					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			3. Transaction Code (Instr. 8) 3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)					4 and Securi Benef Owner		ities F icially (d Following (ership Direct ndirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (I	A) or O)	Price	Tr	eported ansaction str. 3 an	action(s)			(msu. 4)	
Common Stock, par value \$0.01 per share 05/0					3/2013	2013		P		85,000		A	\$0.3	19	45,985,318			D			
		Та									sed of, onvertib				y Owr	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) if any (Month/Day/Year) ive			ansaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares			<u> </u>		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		rnership rm: ect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

/s/ Samuel Herschkowitz

05/06/2013

** 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.