### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  SLATTERY JOSEPH P						2. Issuer Name <b>and</b> Ticker or Trading Symbol TRANSENTERIX INC. [ TRXC ]									neck all ap Dire			Ssuer Owner (specify
(Last) (First) (Middle) C/O TRANSENTERIX, INC. 635 DAVIS DRIVE, SUITE 300						3. Date of Earliest Transaction (Month/Day/Year) 05/13/2016									X belo	ow)	below and CFO	
(Street)  MORRISVILLE NC 27560  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3)				5) Secu Bene	nount of rities ficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
										v	Amount	nt (A) or Pric		rice	Tran	saction(s) r. 3 and 4)		(111501.4)
Common Stock 05/13/24						016					25,000	A	A 5	\$1.889	)(1)	172,387	D	
Common Stock 05/13/20						2016			P 2		25,000	I	A \$1.945		(2)	25,000	I	By IRA
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ay/Year) Execution Date, if any (Month/Day/Year) 8			saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed . 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount	B. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

- 1. The shares were purchased in multiple transactions at prices ranging from \$1.8789 to \$1.90, with a weighted average price per share of \$1.889. The reporting person undertakes to provide TransEnterix, Inc., any security holder of TransEnterix, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price with the ranges set forth in this footnote.
- 2. The shares were purchased in multiple transactions at prices ranging from \$1.9286 to \$1.95, with a weighted average price per share of \$1.945. The reporting person undertakes to provide TransEnterix, Inc., any security holder of TransEnterix, Inc. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price with the ranges set forth in this footnote.

## Remarks:

/s/ Joshua Weingard as attorney 05/16/2016 in fact for Joseph P Slattery

\*\* 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.