FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasnington,	D.C.	20549	

<b>STATEMENT</b>	OF CHANGE	S IN BENEFICE	AL OWNERSHIP

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

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>Ansari Naqeeb A.</u>				2. Issuer Name and Ticker or Trading Symbol EnteroMedics Inc [ ETRM ]							elationship o eck all applica Director	able)	g Perso	10% Ov	vner		
(Last) (First) (Middle) 2800 PATTON ROAD				3. Date of Earliest Transaction (Month/Day/Year) 01/19/2016							Officer (below)	(give title SVP of Sa		Other (s below) es	pecify		
(Street) ST. PAU	L M	ÍN	55113		4. If Amendment, Date of Original Filed (Month/Day/Year)					Line	Y Form fil	ed by One Reporting Person ed by More than One Reporting					
(City)	(S	State)	(Zip)										Person				
		Ta	ble I - Non	-Deriva	ative S	ecuritie	s Ac	quired,	Dis	posed o	f, or Ber	neficially	/ Owned				
D		Date	th/Day/Year) if an		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.			Beneficia Owned Fo	Form (D) or		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and				(Instr. 4)		
Common Stock												10,	000		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
Derivative Conversion Date Execution I Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution Dat if any (Month/Day/Ye	Cod	nsaction le (Instr.	Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Cod	le V	(A)		Date Exercisabl		Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Stock Option (Right to	\$1.31	01/19/2016		A		106,667		01/19/2017	(1)	01/19/2026	Common Stock	106,667	\$0.00	106,6	67	D	

## Explanation of Responses:

1. Vests 25% one-year from the date of grant on the date noted and thereafter in cumulative installments of 1/36th per month.

## Remarks:

Greg S. Lea, Attorney in Fact for Naqeeb A. Ansari

\*\* Signature of Reporting Person Date

01/21/2016

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

- $^{\star}$  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.