FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
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l	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

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Name and Address of Reporting Person* REYNOLDS FRANCIS				IN	2. Issuer Name and Ticker or Trading Symbol INVIVO THERAPEUTICS HOLDINGS CORP. [NVIV]										all app Direc			X 10% C	Owner		
(Last) (First) (Middle) 81 LAKE SHORE RD.						3. Date of Earliest Transaction (Month/Day/Year) 02/27/2014											Officer (give title below)		Other below)	(specify	
(Street) SALEM (City)	NI (St		03079 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv _ine) X	Forn Forn	al or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - No	n-Deriv	ative	Sec	uritie	s Acc	uired,	Dis	posed o	f, o	r Ben	efic	ially	Owne	ed				
			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						4 and Secur Bene Owne		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 02/27				//2014	2014		S ⁽¹⁾		12,50	0	D	\$2.37		9,798,920		D					
Common	ommon Stock 02/28/					2014		S ⁽²⁾		12,50	0	D	\$2.51		9,786,420			D			
Common	mmon Stock															2	3,488		I	401K Plan	
		Ta	able II - I								sed of, onvertib					wned					
Derivative Security (Instr. 3) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Security Execution Date, if any (Month/Day/Year) Security			4. Transac Code (I 8)	nstr.	5. Nu of Deriv Secu Acqu (A) o Dispo of (D) (Instrance and E	6. Date Expiration (Month/D	e Amount of			ount	nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					

Explanation of Responses:

- 1. All sales between \$2.29 \$2.60.
- 2. All sales between \$2.46 \$2.60.

Remarks:

All Sold under 105B-1 Sales plan.

/s/ Francis Reynolds

02/28/2014

** 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.