FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL 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
J	obligations may continue. See
	Instruction 1(h)

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* REYNOLDS FRANCIS				IN	2. Issuer Name and Ticker or Trading Symbol INVIVO THERAPEUTICS HOLDINGS CORP. [NVIV]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner Officer (cive title Other (specify)							
(Last) 81 LAKE	st) (First) (Middle) LAKE SHORE RD.						3. Date of Earliest Transaction (Month/Day/Year) 01/16/2014										Officer (give title Other (specify below) below)					
(Street) SALEM (City)	NF (St		03079 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) 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																					
Di				2. Transaction Date (Month/Day/Year)		r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.						, 4 and Secu Bene Own		Amount of curities neficially ned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)		Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock			01/16	16/2014				S ⁽¹⁾		12,500	D \$2		\$2	.34	10,101,920		D				
Common Stock					01/17/2014				S ⁽²⁾		12,500	0	D	\$2.38		10,089,920		D				
Common Stock																2	23,488		I	401K Plan		
Common Stock 01/21						1/2014			S ⁽³⁾		12,500 D \$		\$2	.37	10,076,920		D					
		Та									sed of, onvertib					vned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	ate, Transa Code (I		of E		6. Date E Expiratio (Month/D	n Date	•	7. Title and Amount of Securities Underlying Derivative Security (In and 4)		str. 3	Deri Secu	. Price of lerivative lecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Owne Form: Direct or Ind (I) (Ins	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code		v	(A)	(D)	Date Exercisa		Expiration Date			nber								

Explanation of Responses:

- 1. All sales between \$2.27 \$2.37.
- 2. All sales between \$2.29 \$2.46.
- 3. All sales between \$2.30 \$2.42.

Remarks:

All Sold under 105B-1 Sales plan.

/s/ Francis Reynolds

01/22/2014

** 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.