FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| - 1 | | | | | | | | |
|-----|--------------------------|-----|--|--|--|--|--|--|
| | OMB APPROVAL | | | | | | | |
| | OMB Number: 3235-0 | | | | | | | |
| | 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* Levin Ross B 2. Date of Event Requiring Statemer (Month/Day/Year) 06/01/2018 | | | | nent | 3. Issuer Name and Ticker or Trading Symbol Stereotaxis, Inc. [STXS] | | | | | | | |
|---|---------------------|---------------|---------------------|--|---|---|--|--|---|---|---|--|
| (Last) C/O STEREO | (First) TAXIS, INC. | (Middle) | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | | |
| 4320 FORES | Γ PARK AVEN | UE; SUITE 100 | | | | Officer (give title below) | Other (spe | ecify | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | |
| (Street) ST. LOUIS | МО | 63108 | | | | | | | X | | y One Reporting Person y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | | ct (D) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Common Shares | | | | | | 0(1) | D | | | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| Expir | | | Expiration D | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | d 3. Title and Amount of Secur Underlying Derivative Secur | | 4. Conve | rcise | 5. Ownership Form: | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | | | Date Exercisable | Expiratio Date | on Title | е | Amount or Number of Shares | Price of Deriva Securi | tive | Direct (D) or Indirect (I) (Instr. 5) | | |

Explanation of Responses:

1. No securities are beneficially owned.

Remarks:

Martin C. Stammer, Chief Financial Officer

06/05/2018

** 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 5 (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.