SEC	Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number: 3235-									
Estimated average bu	ırden								
hours por rosponso:	0.5								

1	ddress of Reporting	Person <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol Stereotaxis, Inc. [STXS]		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Kaminski Michael P			<u></u>	X	Director	10% Owner				
,			—		Officer (give title	Other (specify				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	below)				
C/O STEREOTAXIS INC			06/10/2009		President & CEO					
4320 FOREST PARK AVE., SUITE 100		SUITE 100								
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line)	vidual or Joint/Group Fil	ing (Check Applicable				
ST. LOUIS	МО	63108		X	Form filed by One Re	eporting Person				
		05100			Form filed by More th Person	nan One Reporting				
(City)	(State)	(Zip)								

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)			
Common Stock	06/10/2009		A		14,447(1)	A	\$ <mark>0</mark>	113,597	D				
Common Stock	06/11/2009		G		6,000	D	\$ <mark>0</mark>	107,597	D				
Common Stock	06/11/2009		<b>G</b> <sup>(2)</sup>		3,000	D	\$ <mark>0</mark>	104,597	D				
Common Stock	06/11/2009		G <sup>(2)</sup>		3,000	A	\$0	3,000	Ι	Immediate Family Members <sup>(2)</sup>			

## 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nur of Deriv Secur Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exerci Expiration Da (Month/Day/Yo	te	7. Title Amour Securit Underl Derivat Securit and 4)	it of ties ying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
											Amount				

Explanation of Responses:

1. Shares issued pursuant to the 2008 Annual Bonus Program and the 2008 Quarterly Bonus Program as approved by the registrant's stockholders at their annual meeting held on June 10, 2009.

(D)

2. This transaction involved a gift of securities by the reporting person to two immediate family members who share reporting person's household. The reporting person disclaims beneficial ownership of the shares held by these family members, and this report should not be deemed an admission that the reporting person is the beneficial owner of these shares or purposes of Section 16 or for any other purpose.

Date

Exercisable

Expiration

Date

/s/ Michael P. Kaminski 06/12/2009

\*\* Signature of Reporting Person Date

Number

Shares

of

Title

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).

Code

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.