# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	VAL					
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).

(Print or Type Responses)

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 an Muscari (	CollabRx, Inc. [CLRX] 3. Date of Earliest Transaction (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director Officer (give title below) Other (specify below)								
44 MONTGOMERY STREET, SUITE 800 (Street) SAN FRANCISCO, CA 94104				04/07/2014  4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
(City	7)	(State)	(Zip)	Table I - Non-Derivative Securities Ac					Acquired,	uired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, r) any (Month/Day/Yes		ĺ	Code (Instr.	. 8)	4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)  (A) or Amount (D) Pri		of (D) Own Tran	Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownersl Form: Direct (I or Indire (I) (Instr. 4)	hip of Ber D) Ow ect (In	neficial vnership	
Reminder:	Report on a s	separate line for eac	Table II - I	Derivativ	e Sec	curit	ties Acq	Person contain form di	s wined in splan	ays a curre of, or Bene	n are not ently valid ficially Ow	required OMB co	l to respor	nd unless t		EC 147	74 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	Execution Date, if Transaction of Expiration Date		able and	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	f 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivat Security Direct ( or Indir	n of vative urity: ct (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
				Code	V	(A)	(D)	Exercisable		ate	Title	Number of Shares					
Non- Qualified Stock Option	\$ 3.22	04/07/2014		P			1,667 (1)	04/30/201	4 04	4/07/2024	Common Stock	1,667	\$ 3.22	13,398		D	

# **Reporting Owners**

Donastino Como None / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Muscari Carl	***						
44 MONTGOMERY STREET, SUITE 800 SAN FRANCISCO, CA 94104	X						

## **Signatures**

/s/ Carl Muscari	07/03/2014
Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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).
- (1) 1/6th of the total number of shares subject to the option shall vest on the last day of each month following the vesting commencement date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.