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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0.5

hours per response:

| | Check this box if no longer subject to |
|---|--|
| ١ | 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* Stout Donald E. | | | | | | 2. Issuer Name and Ticker or Trading Symbol Vringo Inc [VRNG] | | | | | | | | | | all app | olicable) ctor | g Person(s) to Iss | | wner |
|---|---|-------------------------|---------------------------|--------------------------------|---|--|---|-----------------------------|---|-----|---|-------|--|-------|------------------------------|---|--|---|--|---|
| (Last) 780 THIR | (Fii | rst) (JE, 15TH FLOO | Middle) <mark>R</mark> | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2013 | | | | | | | | | | | belov | er (give title w) | | below) | (specify |
| (Street) NEW YORK NY 10017 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indiv ine) X | lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | s Ac | quired, | Dis | posed o | f, or | Ben | efici | ally | Owne | ed | | | |
| Date | | | | 2. Transa Date (Month/Da | ay/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | 4 and 5) Secu Bene Own | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | Code | v | Amount | (A) or (D) Prid | | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| Common : | Stock, \$0.0 | 1 par value per s | share | 12/31/ | 2013 | 2013 | | | S | | 9,375 | | D \$2.9505 | | 505 | 178,125 ⁽¹⁾ | | Г | D | |
| Common Stock, \$0.01 par value per share | | | | | | | | | | | | | | | | 733,815 | | I | | By Donald E. and Mary Stout Trust |
| | | Та | | | | | | | | | sed of, onvertib | | | | | vned | | | | |
| 1. Title of Derivative Security (Instr. 3) | vative conversion or Exercise Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) | | | Transa Code (| | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expiration (Month/E | on Dat | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amour or Numbe of Title Shares | | ount nber | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owr Forr Dire or Ir (I) (I | ership n: ct (D) direct nstr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. Of which, 131,250 shares of common stock are represented by unvested restricted stock units.

Remarks:

The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on November 26, 2013 to cover tax liabilities.

/s/ Donald E. Stout 12/31/2013

** 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.