FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL									
	OMB Number:	3235-0287								
l	Estimated average burden									
l	hours per response:	0.5								

	Check this box if no longer subject
$\Box$	to Section 16. Form 4 or Form 5
$\cup$	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

Name and Address of Reporting Person*						Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer						
Hoffman William						Inari Medical, Inc. [ NARI ]									neck all a	pplicable) ector	-	10% Ov			
(Last)	ust) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023									Of	icer (give title ow)		Other (s	· I		
C/O INARI MEDICAL, INC. 6001 OAK CANYON					4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person								
(Street)															Fo	Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)			Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10										nstruction or w	ritten pl	an that is int	ended to		
		Table	l - No	n-Deriva	tive Se	ecur	ities	Acq	uired,	Disp	osed of	f, or	Bene	eficia	ally O	vned					
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Executio			Date,			ties Acquired (A I Of (D) (Instr. 3,			Sec Ben Owi Foll	owing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount	(A (C	A) or D)	Price	Trai	orted saction(s) r. 3 and 4)						
Common Stock 05/18/2						2023			A		2,412(1)	)	A	\$0		1,123,055		D			
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)	tive Conversion bate Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative crities critied r osed ) r. 3, 4	Expiration	Exercisable and ion Date (Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and			8. Price ( Derivativ Security (Instr. 5)		Ownersh Form: y Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)			
					Code	v	(A)	(D)			Expiration Date	Title	Amo or Num of Shai	ber							

## Explanation of Responses:

1. Represents RSUs granted on May 18, 2023, to the Reporting Person that vest in full on the earlier to occur of (i) the one-year anniversary of the grant date and (ii) the date of the 2024 annual meeting.

<u>/s/ Angela Ahmad, attorney-in-fact for William Hoffman</u>

05/19/2023

\*\* 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.