FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.O.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

UNID APPRO	JVAL
OMB Number:	3235-0287
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OMB ADDDOMA

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					<u> </u>	200000	. 50(.	., 51 111	7000		oompany 7 tot	0. 2040							
Name and Address of Reporting Person* Hill, Mitch C.				2. Issuer Name and Ticker or Trading Symbol Inari Medical, Inc. [NARI]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
	RI MEDIC	CAL, INC.	(Middle)		Date of /09/20		est Tra	nsaction	n (Mor	nth/Day/Year)			X	below)	(give title hief Finar	ncial	Other (s below) Officer	ecify
6001 OA	CANYC	ON, SUITE 100			_ 4.1	f Amen	dmer	nt, Date	of Orig	ginal F	iled (Month/D	ay/Year)			/idual or	Joint/Group	Filing) (Check Ap	plicable
(Street) IRVINE	C.	A	92618	i	_										X Form filed by One Reporting Person Form filed by More than One Reportir Person				
(City)	(S	tate)	(Zip)																
		Tab	le I - I	Non-Deri	vativ	e Sec	uriti	ies A	cquir	ed, C	isposed o	of, or E	Benefi	cially	Owned	k			
		2. Transacti Date (Month/Day	-	Execution Date,		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			nd 5) Secu Bene Owne		ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 11/09			11/09/2	021	21			M	м 5,000 ⁽¹⁾ А		\$0.	.457 9		2,715		D			
Common Stock		11/09/2)21				S ⁽¹⁾		4,198	D	\$86.7	7416 ⁽²⁾	88	3,517		D			
Common	Stock			11/09/2	021				S ⁽¹⁾		802	D	\$87.2	\$87.2239(3)		87,715		D	
Common	nmon Stock													1,600			1 1	By spouse	
		7	able								sposed of , converti				wned			,	
Security or E (Instr. 3) Price Der	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	eemed ition Date, h/Day/Year)	4. Transa Code (8)		5. Number of		Expira	te Exer ation D th/Day/		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (Ir	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A) (D)		Date Exercisab		Expiration Date	Title	Amo or Num of Sha	nber					
Stock Options (Right to	\$0.457	11/09/2021			M ⁽¹⁾			5,000	(-	4)	04/23/2029	Commo Stock		000	\$0.00	251,97	7	D	

Explanation of Responses:

- 1. The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on September 11, 2020
- 2. This transaction was executed in multiple trades at prices ranging from \$86.12 to \$87.11. The price reported above reflects the weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. This transaction was executed in multiple trades at prices ranging from \$87.12 to \$87.42. The price reported above reflects the weighted average price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 4. Options vested with respected with 25% of the underlying shares on April 30,2020 and vest with respect to the remaining shares in 36 equal monthly installment there after.

Remarks:

/s/ Angela Ahmad, attorney-in-fact for Mitch C. Hill

11/12/2021

** 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.