FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	D	20E 40	
Vashington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden hours per response:									
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).

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* Nielsen Kirk G.				2. Issuer Name and Ticker or Trading Symbol Inari Medical, Inc. [NARI]								(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/27/2023							'		r (give title		Other (s below)		
C/O INARI MEDICAL, INC. 6001 OAK CANYON				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person							
(Street)	C	A :	92618												Form Perso	filed by Mor	e than	One Repo	rting
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tabl	e I - Noi	n-Deriv	ative S	Sec	uriti	es Ac	quired, [Disp	osed	of, or B	ene	ficial	ly Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution Date,		Code (In	Transaction Disposed Of (D) (Instr. 3 Code (Instr. 5)				Benefic Owned	es ially Following	Form:	Direct of Indirect Itr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V Amount (A) or Pr		Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)						
Common Stock 05/27/2					/2023	Ī			М		2,98	32 A		\$0	61,479		J	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) 2. Conversion or Exercise Price of Derivative Security Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)		n Date,	Transaction of Code (Instr. 8) Secur Acqu (A) or Dispo		or posed D) tr. 3, 4	Expiration Date (Month/Day/Year		Amount of			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisable		piration te	Title	or Nu of	nount mber ares					
Restricted Stock Unit	\$0 ⁽¹⁾	05/27/2023			M			2,982	(1)		(1)	Common Stock	2,	982	\$0	0		D	

Explanation of Responses:

1. The Reporting Person was granted restricted stock units ("RSUs") which represent a contingent right to receive one share of common stock for each RSU. 1/3 of the RSUs vested on May 27,2021, and the remaining RSUs will vest annually thereafter over the next two years.

> /s/ Angela Ahmad, attorney-in-05/30/2023 fact for Kirk Nielsen

** 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.