FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Nashington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	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).

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* Hoffman William					2. Issuer Name and Ticker or Trading Symbol Inari Medical, Inc. [NARI]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	•	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/04/2023									give title		(specify	
C/O INARI MEDICAL, INC. 6001 OAK CANYON				_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) IRVINE	C.	A	92618										Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		- R	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.									d to satisfy			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Trans Date (Month)				Execut Day/Year) if any		2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction D		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		(A) or 3, 4 and 5)	5. Amoun Securities Beneficia Owned Fo	Form (D) o	Ownership orm: Direct 0) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)		(Instr. 4)		
Common Stock 12/04/				04/202	/2023		М		65,168	A	\$0.4284	1,032	2,169	D				
Common Stock 12/04/				04/202	2023 N		M		38,324	A	\$0.4284	1,070,493		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	ion ise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8) Secur (Acquisor Oise) Code (Instr. 8) Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)						
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option	\$0.4284	12/04/2023			M			65,168 ⁽¹⁾	12/13/2	019	12/13/2028	Common Stock	65,168	\$0	0	D		
Stock Options (Right to Buy)	\$0.4284	12/04/2023			M			38,324 ⁽²⁾	03/29/2	019	05/03/2028	Common Stock	38,324	\$0	0	D		

Explanation of Responses:

- 1. Option became vested and exercisable as of December 13, 2022. The option has been fully exercised by the reporting person.
- 2. Option became vested and exercisable as of March 29, 2022. The option has been fully exercised by the reporting person.

/s/ Shannon Trevino, attorneyin-fact for William Hoffman

** Signature of Reporting Person Date

12/06/2023

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.