SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ursuant 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* MILDER DONALD B					2. Issuer Name <b>and</b> Ticker or Trading Symbol Inari Medical, Inc. [NARI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
MILDER DONALD B						[ - · · - · · · ]								X Direct	10% Owner		ner			
(Last)	(Fi	rst)	) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/27/2023								Officer (give title below)			Other (specify below)		
C/O INARI MEDICAL, INC. 6001 OAK CANYON				4. lf /	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												ו ו						
(Street)	C	02010													Form filed by More than One Reporting Person					
IRVINE	C	A	92618		Bu	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)								•												
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is inten satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.											ntende	ed to						
		Tabl	e I - N	on-Deriv	vative	Sec	uriti	ies Ac	quired	, Di	sposed	of, or B	eneficia	lly Owne	ed					
Date			2. Transac Date (Month/Da		Exec if any	if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			nd Securities Beneficially Owned 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 Transactio (Instr. 3 an				(Instr. 4)		
Common	Stock			05/27/2	2023				М	A 2,982 A \$0 255,000 D										
Common Stock													2,975,614		I		Milder Community Property Trust <sup>(1)</sup>			
<u> </u>				Daritua	41. va C				 			L av Dav								
		li	adie II								convert			y Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execut if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		n of		xerci on Da Day/Y		7. Title ar Amount o Securities Underlyir Derivativ (Instr. 3 a	of s Ig e Security	8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares							
Restricted Stock	\$0	05/27/2023			М			2,982	(2)		(2)	Common Stock	2,982	\$0	0		D			

Explanation of Responses:

1. The reporting person is a trustee of the Milder Community Property Trust DTD 11/7/91, as amended.

2. 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 Donald Milder

\*\* 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.