FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 $^{\star}$ $\underline{Tu\ Thomas}$						2. Issuer Name and Ticker or Trading Symbol Inari Medical, Inc. [ NARI ]									all app	tor	ng Per	10% Ov	vner
(Last)	(Fir	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 07/16/2024								<b>V</b>	Officer (give title below)  Chief Medical			Other (s below) Officer	specify
6001 OAK CANYON						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) IRVINE CA 92618						Form filed by One Reporting P Form filed by More than One R Person									Ū	- 1			
(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.													nded to
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)					.	if any	emed tion Date, n/Day/Year)		3. Transaction Code (Instr. 8)		Acquired (A) of f (D) (Instr. 3, 4		nd 5) Securi Benefi Owned		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price			ed ction(s) 3 and 4)			(Instr. 4)
Common Stock 07/16/20					)24				<b>S</b> <sup>(1)</sup>		3,480	D	\$55.1	6(2)	309,777			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	3. Transaction Date (Month/Day/Year)	Execu if any	eemed ution Date, h/Day/Year)	4. Transa Code ( 8)		of	r osed ) r. 3, 4	Expira	e Exercation D h/Day/		7. Titl Amou Secur Under Derive Secur 3 and	int of rities rlying ative rity (Instr. 4)	Der	rice of ivative curity etr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Inc (I) (In	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	or Number of Shares						

## **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 November 11, 2023.
- 2. This transaction was executed in multiple trades at prices ranging from \$55.00 to \$55.52. 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.

/s/ Shannon Trevino, attorney-07/18/2024

\*\* 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.