FORM 4

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

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

OMB APPROVAL										
OMB Number:	3235-0287									
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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

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Name and Address of Reporting Person*     Tu Thomas						2. Issuer Name and Ticker or Trading Symbol Inari Medical, Inc. [ NARI ]									ck all applic Directo	son(s) to Issi	wner		
(Last)	(FI RI MEDIC	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024									below)	Officer (give title elow)  Chief Med		Other (s below) Officer	pecify
6001 OAK CANYON					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	C	A	92618											) X		iled by Mor		orting Persor	
(City) (State) (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.									to										
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date			2. Trans Date (Month		Day/Year)  2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed O Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 a			5. Amou Securitie Beneficia Owned F	es For ally (D) Following (I) (		orm: Direct b) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or	Price	Transact (Instr. 3 a	on(s)			(Instr. 4)
Common Stock				02/1	6/202	6/2024			A		14,812	2(1)	1	\$0 334		016(2)		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  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Y			Date,	Code (Instr.		ı of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Nu of	nount mber ares					
Stock Options (Right to Buy)	\$58.44	02/16/2024			A		16,231		(3)	(	02/15/2031	Common Stock	16	5,231	\$58.44	16,23	1	D	

## **Explanation of Responses:**

- 1. Represents annual restricted stock units ("RSUs") awarded to the reporting person, with a vesting commencement date of January 1, 2024 (the "Vesting Commencement Date"). 1/16th of the RSUs shall vest on each quarterly anniversary of the Vesting Commencement Date, subject to continued service through the applicable vesting date.
- 2. Includes 55 shares acquired on January 31, 2024 under the Company's Employee Stock Purchase Plan.
- 3. Represents options to purchase shares of Issuer common stock which were granted on February 16, 2024 under the Issuer's 2020 Incentive Award Plan and are scheduled to become vested and exercisable on a quarterly basis, with the first tranche vesting on April 1, 2024.

/s/ Shannon Trevino, attorneyin-fact for Thomas Tu

02/21/2024

\*\* 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.