FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | DС | 20549 |
|---------------|------|-------|
| rvasiliigion, | D.C. | 20040 |

| 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 | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 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* Hill, Mitch C. | | | | 2. Issuer Name and Ticker or Trading Symbol Inari Medical, Inc. [NARI] | | | | | | | | | | k all app Direc | tionship of Reportin all applicable) Director Officer (give title | | rson(s) to Is 10% Over (see the content of the con | ner | | | |
|--|--|--|--------------|--|-------------------------------|--|-----|---|-------------------------------------|---|--------------------|---|--------------------------------------|--|--|---|--|--|---------------------------------------|--|--|
| (Last) (First) (Middle) C/O INARI MEDICAL, INC. 6001 OAK CANYON | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/01/2023 | | | | | | | | | below) below) Chief Financial Officer | | | | | | |
| (Street) IRVINE (City) | CA (Sta | | 2618 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Lir | | | | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| Date | | | Date | Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | 4 and Securi Benefi Owned | | ies cially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Pric | e | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| Common Stock 01/0 | | | | 01/01/2 | 2023 | | | | F | | 273(1) | D | \$6 | 63.56 59 | | 9,213 | | D | | | |
| Common Stock 01/01/2 | | | | 023 | | | F | | 509(2) | D | \$6 | 3.56 | 58,704 | | | D | | | | | |
| Common Stock | | | | | | | | | | | | | | 1 | ,600 | | | By Spouse | | | |
| 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) | if any | emed ion Date, /Day/Year) | 4. Transa Code (I 8) | | | | Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | De Se (In: | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | | Amoun or Numbe of Shares | r | | | | | | | |

Explanation of Responses:

- 1. Consists of shares of common stock retained by Inari to satisfy the reporting person's tax obligation in connection with the vesting of restricted share units awarded in 2021.
- 2. Consists of shares of common stock retained by Inari to satisfy the reporting person's tax obligation in connection with the vesting of restricted share units awarded in 2022.

/s/ Angela Ahmad, attorneyin-fact for Mitch C. Hill

01/04/2023

** 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.