

Reported by LOUGHLIN JAMES J

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 09/25/12 for the Period Ending 09/21/12

Address 321 COLUMBUS AVENUE

BOSTON, MA 02116

Telephone (857) 453-6553

CIK 0001433607

Symbol NSPR

Fiscal Year 12/31





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

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Add	ress of Re	porting 1	Person *	2	. Iss	uer Nam	ne a	nd Ticl	ker	or Tradi	ng Sym	bol	5. Relation (Check all			Person(s)	to Issuer
LOUGHLIN.	JAMES	J		I	nsp	oireMD), I	nc. []	NS	PR.OB	3]						
(Last) (First) (Middle)			3	3. Date of Earliest Transaction (MM/DD/YYYY)							X Director 10% Owner						
C/O INSPIREMD, INC.,, 4 MENORAT HAMAOR ST.					9/21/2012							Officer (give title below) Other (specify below)					
MENORALE	(Street)	<u>)K 51.</u>				Amendm DD/YYYY)		, Date	Ori	iginal Fil	ed		6. Individu Applicable Li		nt/Group I	Filing (Che	eck
TEL AVIV, L	3 67448 (State)	(Zip))												Reporting Per		n
				Deriv	vativ	ve Secur	itie	s Acqu	ire	ed, Dispo	sed of,	or I	Beneficially		*	orting reaso	<u> </u>
1.Title of Security (Instr. 3)				2. Tra Date		2A. Deemed Execution Date, if	n C	. Trans. dode (nstr. 8)	A D (I	Construction (A) Constr	or (D) (Ir (Ir (1)) (llowi	unt of Securitie ng Reported T and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial
Tab	le II - Dei	rivative	Securitio	es Be	enef	icially C)wn	ed (<i>e.</i> g	z.,	puts, ca	lls, war	ran	ts, options,	convert	ible secur	ities)	
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans.	3A. Deemed Execution Date, if any	4. Trans Code (Instr 8)	s. I s. S r. A I	5. Number of Derivative Securities Acquired (A) of Disposed of (D. (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date			7. Title and An Securities Und Derivative Sec (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Nu	nount or mber of ares		Transaction (s) (Instr. 4)	4)	
Options to Purchase Common Stock	\$2.25	9/21/2012		A		100000		(1)		9/21/2022	Commo	n	100000	\$0	100000	D	

Explanation of Responses:

(1) The option is exercisable in three equal annual installments. The first installment becomes exercisable on September 21, 2013, the second installment becomes exercisable on September 21, 2014 and the third installment becomes exercisable on September 21, 2015, provided the option becomes exercisable as to any remaining shares immediately on such date that Mr. Loughlin is not re-elected as a director at the issuer's 2014 annual meeting of stockholders or such date that Mr. Loughlin is not re-nominated as a director for the issuer's 2014 annual meeting of stockholders.

Reporting Owners

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
LOUGHLIN JAMES J C/O INSPIREMD, INC., 4 MENORAT HAMAOR ST. TEL AVIV, L3 67448	X						

/s/ James J. Loughlin

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** Signature of Reporting Person

9/24/2012 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 control number.