

# Reported by SHORE CRAIG

## FORM 4

(Statement of Changes in Beneficial Ownership)

# Filed 02/05/19 for the Period Ending 02/04/19

Telephone (888) 776-6804

CIK 0001433607

Symbol NSPR

SIC Code 3841 - Surgical and Medical Instruments and Apparatus

Industry Medical Equipment, Supplies & Distribution

Sector Healthcare

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Shore Craig					InspireMD, Inc. [ NSPR ]								,	10	n/ 0		
(Last)	(Last) (First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Director  X Officer (9)	Director10% Owner  X Officer (give title below) Other (specify below)				
C/O INSPIREMD, INC., 4 MENORAT HAMAOR ST.					2/4/2019							CFO AND CA			omer (speer	.,,	
(Street)				4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual o	6. Individual or Joint/Group Filing (Check Applicable Line)				
TEL AVIV, L3 6744832 (City) (State) (Zip)												X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
			Table I	- Non-De	rivati	ive Secı	ırities Ac	quir	ed, Di	sposed (	of, or	В	eneficially Owne	ed			
1.Title of Security (Instr. 3)  2. Trans. D			. Trans. Date	Execution Date, if any		3. Trans. Co (Instr. 8)	de	4. Securities Acqui or Disposed of (D) (Instr. 3, 4 and 5)		)		5. Amount of Securiti Following Reported T (Instr. 3 and 4)	ies Beneficially Owned Fransaction(s)		Ownership Form: Direct (D) or Indirect (	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	V						(I) (Instr. 4)				
Common Stock 2/4/2019			2/4/2019	9 A				300000 A \$0			300532			D			
	Tab	le II - De	rivative S	ecurities	Bene	ficially	Owned (	e.g. ,	, puts,	calls, w	arrai	nts	s, options, conve	rtible sec	urities)		
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date Ex	3A. Deeme Execution Date, if an	(Instr. 8	Acquire Dispose		e Securities (A) or		6. Date Exercisable and Expiration Date				es Underlying ve Security		derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title		mount or Number of hares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

#### **Explanation of Responses:**

**Reporting Owners** 

	Relationships Director 10% Owner Officer Other							
Reporting Owner Name / Address								
1 2	Director	10% Owner	Officer	Other				
Shore Craig								
C/O INSPIREMD, INC.			CFO AND CAO					
4 MENORAT HAMAOR ST.								
TEL AVIV, L3 6744832								

### **Signatures**

/s/ Craig Shore	2/5/2019		
**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 control number.