

INSPIREMD, INC. Reported by BARRY JAMES J

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/06/19 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 |

Powered By EDGAR Online

http://www.edgar-online.com

© Copyright 2019, EDGAR Online, a division of Donnelley Financial Solutions. All Rights Reserved. Distribution and use of this document restricted under EDGAR Online, a division of Donnelley Financial Solutions, Terms of Use.

| FORM 4 | |
|--------|--|
|--------|--|

[] 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

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

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 + | 6 5 | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |
|-----------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------------|
| Barry James J | InspireMD, Inc. [NSPR] | |
| (Last) (First) (Middle) | 3. Date of Earliest Transaction (MM/DD/YYYY) | X Director 10% Owner X Officer (give title below) Other (specify below) |
| C/O INSPIREMD, INC., 4 MENORAT HAMAOR ST. | 2/4/2019 | President and CEO |
| (Street) | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | 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-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| | | | | _ | _ | | | | | |
|---------------------|----------------|--------------|------------------------|---|----------------------------|--------|-------|--------------------------------------------|-------------|-------------|
| 1.Title of Security | 2. Trans. Date | 2A. Deemed | 3. Trans. Code | | 4. Securities Acquired (A) | | d (A) | 5. Amount of Securities Beneficially Owned | 6. | 7. Nature |
| (Instr. 3) | | Execution | (Instr. 8) | | or Disposed of (D) | | | Following Reported Transaction(s) | Ownership | of Indirect |
| | | Date, if any | (Instr. 3, 4 and 5) (I | | | and 5) | | (Instr. 3 and 4) | Form: | Beneficial |
| | | | | | | | | | Direct (D) | Ownership |
| | | | | | | | | | or Indirect | (Instr. 4) |
| | | | | | | (A) or | | | (I) (Instr. | |
| | | | Code | V | Amount | (D) | Price | | 4) | |
| Common Stock | 2/4/2019 | | Α | | 2000000 | Α | \$0 | 2001382 | D | |
| | | | | | | | | | | |

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | | | | | | | | | - | | | | |
|----------------------|-------------|-----------|--------------|-------------|------|--------------|--------|--------------|-------------|--------|-------------------------------|-------------|----------------|-------------|------------|
| 1. Title of Derivate | 2. | 3. Trans. | 3A. Deemed | 4. Trans. (| Code | 5. Number | of | 6. Date Exer | cisable and | 7. Tit | le and Amount of | 8. Price of | 9. Number of | 10. | 11. Nature |
| Security | | | | (Instr. 8) | | Derivative | | Expiration I | | | | Derivative | | Ownership | |
| (Instr. 3) | or Exercise | | Date, if any | | | Acquired (| A) or | | | Deriv | ative Security | Security | Securities | Form of | Beneficial |
| | Price of | | | | | Disposed o | of (D) | | | (Instr | . 3 and 4) | (Instr. 5) | Beneficially | Derivative | Ownership |
| | Derivative | | | | | (Instr. 3, 4 | and 5) | | | | | | Owned | Security: | (Instr. 4) |
| | Security | | | | | | | | | | | | Following | Direct (D) | |
| | | | | | | | | Date | Expiration | | Amount or Number of | | Reported | or Indirect | |
| | | | | | | | | Exercisable | Date | Title | Amount or Number of Shares | | Transaction(s) | (I) (Instr. | |
| | | | | Code | V | (A) | (D) | | | | | | (Instr. 4) | 4) | |

Explanation of Responses:

Reporting Owners

| Penorting Owner Name / Address | Relationships | | | | | |
|--------------------------------------------------------------------------------------|---------------|-----------|-------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| Barry James J C/O INSPIREMD, INC. 4 MENORAT HAMAOR ST. TEL AVIV, L3 6744832 | x | | President and CEO | | | |

Signatures

| /s/ James J. Barry | 2/6/2019 |
|----------------------------------|----------|
| ** 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.