

Reported by ROGERS CAMPBELL

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/02/15 for the Period Ending 01/26/15

Address 321 COLUMBUS AVENUE

BOSTON, MA 02116

Telephone (857) 453-6553

CIK 0001433607

Symbol NSPR

SIC Code 3841 - Surgical and Medical Instruments and Apparatus

Industry Medical Equipment & Supplies

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.								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Rogers Camp	bell			I	nsp	pireMD), I	nc. [NS	PR]							
<u> </u>				3.	3. Date of Earliest Transaction (MM/DD/YYYY) 1/26/2015						, – –	X Director 10% Owned Officer (give title below) Other (special below)			Owner	
															(specify	
16041		,														
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)				
BOSTON, MA	02199										Y Form f	iled by One	Reporting Pe	reon		
(City)	(State)	(Zip))										than One Rep		n	
		Table l	I - Non-I	Deriv	ati	ve Secur	itie	s Acquire	ed, Dispo	sed of, o	r Beneficially	y Owned	l			
1.Title of Security (Instr. 3)				2. Tra Date	ans.	2A. Deemed Executio Date, if any	n C	Code A (Instr. 8) D (I	. Securities acquired (A) Disposed of (Instr. 3, 4 an (A) or (D)	or Foll (Ins	amount of Securitioning Reported T tr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Tab	le II - Dei	rivative	Securitio	es Be	enef	icially O)wn	ned (e.g. ,	puts, cal	lls, warr	ants, 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.]	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date				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.	Beneficial	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction (s) (Instr. 4)	(4)		
Stock Options (right to buy)	\$0.72	1/26/2015		A		54088		(1)	1/26/2025	Common Stock	54088	\$0	54088	D		

Explanation of Responses:

(1) The option vests in three equal annual installments, with 1/3 becoming exercisable on each of January 26, 2016, January 26, 2017 and January 26, 2018, subject to Dr. Roger's continued service.

Reporting Owners

Deporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Rogers Campbell C/O INSPIREMD, INC. 800 BOYLSTON STREET, SUITE 16041 BOSTON, MA 02199	X						

Signatures

/s/ Campbell Rogers

2/2/2015

^{**} Signature of Reporting Person

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.