FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					Τ								T						
Name and Address of Reporting Person* Tommasoli Andrea			2. Issuer Name and Ticker or Trading Symbol InspireMD, Inc. [NSPR]						Relationship of Reporting Person(s) to Issuer (Check all applicable)										
Tommason / Merca														Director 10% Owner					
(Last)	nst) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/23/2024						X	X Officer (give title Other (spe below) below)						
C/O INSPIREMD, INC. 4 MENORAT HAMAOR ST.						01/23/2021								Chief Operating Officer					
- Militard Hamilton St.					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X Form filed by One Reporting Person					
TEL AVIV L3 6744832					Form filed by More than One Reporting Person											ting			
(City)	(Sta	te)	(Zip)																
Rule 10b5-	Check	ction Indication this box to indic ons of Rule 10b					pursua	ant to	a cont	ract,	instructior	n or written pl	an that is i	intended to	satisfy th	e affir	mative defe	ense	
				Т										T					
		Tab	le I – No	n-Der	ivat	ive Sec	uritie	s A	cquir	ed,	Dispose	ed of, or B	eneficia	ally Own	ed				
,, ,,				2. Transaction Date (Month/ Day/Year)		2A. Deemed Execution Date, if any (Month/				ties Acquired (A) or I Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Day/ Year)		.11/	Code	V	Amou	nt (A) or (D)	Price	(Instr. 3 and 4)						
Common Stock				01/2	23/2024	2024		A		238,62	5 ⁽¹⁾ A	\$0	495,078		D				
		т	ahle II –	Deriv	ativ	e Secur	ities	Δα	mired	l Di	snosed	of, or Be	neficiall	v Owner	1				
		•	ubic ii	(e.g.,	puts	s, calls,	warr	ants	s, opt	ions	s, conve	ertible sec	urities)	y Omnoc	•				
(Instr. 3) Price of Date, if any Security (Month/Day/		Deemed Execution Date, if any (Month/ Day/	4. Transac Code (I 8)	5. Number		Exp (A) or of (D)		Date Exercisable and oiration Date (Month/Day/ ar)		7. Title and A Securities Un Derivative Se (Instr. 3 and 4	derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Year)	Code	v	(A)	(D)		oate cisable	E	xpiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)				
Options to purchase common stock (right to buy)	\$3.14	01/23/2024		A		91,218			(2)	01/	23/2034	Common Stock	91,218	\$0	176,69	99	D		

Explanation of Responses:

- 1. These shares of common stock represent shares of restricted stock, which vest and become exercisable in three equal annual installments, with 1/3 vesting on each of January 23, 2025, January 23, 2026 and January 23, 2027, subject to the Reporting Person's continued service.
- 2. The options vest and become exercisable in three equal installments, with 1/3 vesting on each of January 23, 2025, January 23, 2026 and January 23, 2027, subject to the Reporting Person's continued service.

Remarks:

Exhibit 24.1: Power of Attorney

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).