FORM 4

## UNITED STATES SECURITIES AND EXCHANGE

**COMMISSION** Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours 0.5 per 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

1. Name and Address of Reporting Person* Gleason Shane Thomas			2. Issuer Name <b>and</b> Ticker or Trading Symbol InspireMD, Inc. [NSPR]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Gleason Shan	e momas				Director	10% Owner			
(Last)	Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/23/2024		Officer (give title below)	Other (specify below)			
C/O INSPIREMD, INC.									
4 MENORAT HAMAOR ST.			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 Report	rting Person			
TEL AVIV	L3	6744832			Form filed by More than Person	One Reporting			
(City)	(State)	(Zip)							

Rule 10b5-1(c) Transaction Indication

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Table I – Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned												
1. Title of Security (Instr. 3)	2. Transaction Date (Month/ Day/Year)	2A. Deemed Execution Date, if any (Month/ Day/ Year)	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (I	cquired (A) or D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock	01/23/2024		A		238,625 <sup>(1)</sup>	A	\$0	514,365	D			

Table II – Derivative Securities Acquired, Disposed of, or Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)															
Derivative ( Security ( (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/ Day/Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/ Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Options to purchase common stock (right to buy)	\$3.14	01/23/2024		А		91,218		(2)	01/23/2034	Common Stock	91,218	\$0	183,128	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

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 Number.