

# INSPIREMD, INC. Reported by BARER SOL J

### **FORM 4** (Statement of Changes in Beneficial Ownership)

## Filed 05/31/13 for the Period Ending 05/31/13

Telephone (888) 776-6804 CIK 0001433607 Symbol NSPR Fiscal Year 12/31

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FORM 4	
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[] 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 <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
BARER SOL J (Last) (First) (Middle) C/O INSPIREMD, INC., 4 MENORAT HAMAOR ST.	InspireMD, Inc. [ NSPR ] 3. Date of Earliest Transaction (MM/DD/YYYY) 5/31/2013	X Director 10% Owner Officer (give title below) Other (specify below)			
(Street) TEL AVIV, L3 67448 (City) (State) (Zip)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person			

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Common Stock	5/31/2013	Р		20000	А	\$2.26 ( <u>1</u> )	1900000	D	
		Code	v	Amount	(A) or (D)	Price		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
1. Title of Security (Instr. 3)	2. Trans. Date	 (Instr. 8)		4. Securities Acquired (A) Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial

#### 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. C	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	Conversion	Date	Execution	(Instr. 8)		Derivative Securities		Derivative Securities		Derivative Securities Expiration		Expiration I	Date	Secur	ities Underlying	Derivative	derivative	Ownership	of Indirect
(Instr. 3)	or Exercise		Date, if any			Acquired (A) or		Acquired (A) or			Deriv	ative Security	Security	Securities	Form of	Beneficial			
	Price of					Disposed o	f (D)			(Instr	. 3 and 4)	(Instr. 5)	Beneficially	Derivative	Ownership				
	Derivative					(Instr. 3, 4 and 5)		ir. 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:**

(1) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$2.23 to \$2.30, inclusive. The reporting person undertakes to provide to InspireMD, Inc., any security holder of InspireMD, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BARER SOL J C/O INSPIREMD, INC. 4 MENORAT HAMAOR ST. TEL AVIV, L3 67448	X					

#### Signatures

/s/ Sol J. Barer	5/31/2013
** 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.