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, | DC | 20549 |
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| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* HIGGINS THOMAS T | | | | 2. Issuer Name and Ticker or Trading Symbol NeuroMetrix, Inc. [NURO] | | | | | | | lationship of ck all applica Director | ner | | | | | |
|--|--|--|--|--|---|-------------------------|--------|--|--------|--------------------|---|--|-----------------------------------|--|--|---|----|
| (Last) | (F JROMETR | , | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 11/22/2023 | | | | | | X | below) | give title or Vice P | resid | Other (sp below) ent, CFO | есіту | |
| 4B GILL STREET | | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | Line) | l ' | | | | | | | |
| (Street) WOBUR | N M | ΙA | 01801 | | | | | | | | | X | | • | | rting Person One Reporti | ng |
| (City) | (S | tate) | (Zip) | F | 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 | | | | | | | | | | | | | | | | |
| Date | | | 2. Transact Date (Month/Day | Day/Year) Execution Date, Tr | | | Code (| 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | 5. Amoun Securities Beneficial Owned Fo | Form (D) of the collowing (I) (In | | n: Direct li or Indirect E nstr. 4) C | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Transaction (Instr. 3 and | tion(s) | | | 113u. 4) | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date Execution (Month/Day/Year) if any | 3A. Deemed Execution Dat if any (Month/Day/Ye | Date, Transaction Code (Insti | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4 | | f g Security | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | e s Ily | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | | | |
| Restricted Stock Unit | \$3.6 | 11/22/2023 | | A | | 5,625 ⁽¹⁾⁽²⁾ | | 01/01/20 | 024 | 01/01/2024 | Common Stock | 5,625 | \$0 | 5,625 | 5 | D | |

Explanation of Responses:

- 1. On November 22, 2023, the reporting person was granted 5,625 restricted stock units, which vest in equal quarterly installments over three years beginning on January 1, 2024.
- 2. Effective on November 21, 2023, the Issuer effected a reverse stock split of its common stock at a ratio of 1-for-8.

Remarks:

/s/ Thomas T. Higgins, 03/06/2024 Attorney-in-fact

** 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 Number.