Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB APPROVAL									
OMB Number:	3235-0287								
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Name and Address of Reporting Person*     Gozani Shai					2. Issuer Name and Ticker or Trading Symbol NeuroMetrix, Inc. [ NURO ]										(Ch	Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Gozaiii	Silai				1					_						X Directo	or		10% Ov	√ner		
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/02/2024									X Officer below)	(give title		Other (s below)	pecify				
C/O NE	JROMETR	IX, INC.			"	02,2											Preside	nt & (	CEO			
4B GILI	STREET				4. If	Amer	ndmer	nt, Date	of Or	riginal F	iled	(Month/Da	ay/Ye	ear)	6. Ir Line	ndividual or (	Joint/Group	Filing	(Check App	plicable		
(Street)																X Form f	iled by One	Repo	orting Person	n		
WOBUR	RN M	A	01801													Form f Persor		e than	One Repor	ting		
(City)	Rule 10b5-1(c) Transaction Indication																					
						Chec	k this by the a	oox to ind ffirmative	icate defe	that a tr	ansa ditior	ction was n ns of Rule 1	nade   10b5-1	pursuant 1(c). See	to a cont Instruction	ract, instruction 10.	on or written	plan th	nat is intended	d to		
		Tab	le I - Nor	า-Deriva	ative	Sec	curit	ies Ac	qui	ired, I	Disp	osed c	of, o	r Ben	eficial	ly Owned	t					
Date			2. Transa Date (Month/D	h/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		,   [	Transaction Dispose Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,		l (A) or . 3, 4 and	Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									(	Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)		
Common Stock 02/0					2/2024				M		636(1	1)	A	\$3.0	3 10	,518	D					
Common Stock 02/02					2/2024	4			F 94 <sup>(2)</sup> D		\$3.0	10,424			D							
		7	Гable II -							,	•	sed of, onverti	,		,	Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date, T	ransaction ode (Instr.				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Se (Instr. 3 and 4			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactio (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	1	Amount or Number of Shares							
Restricted Stock Unit	\$3.03	02/02/2024			M			636 <sup>(3)</sup>	02/0	02/2024	0	2/02/2024		nmon	636	\$3.03	3,178	3	D			

## **Explanation of Responses:**

- 1. Represents shares earned upon the vesting of restricted stock units referenced in footnote 3.
- 2. Represents shares withheld in payment of withholding taxes upon vesting of the restricted stock units referenced in footnote 3.
- 3. On May 24,2022, the reporting person was granted 61,029 restricted stock units prior to the reverse stock split of the Issuer's common stock at a ratio of 1-for-8, effective as of November 21, 2023, which vest in equal quarterly installments over three years beginning on August 2, 2022.

## Remarks:

Stock Unit

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

\*\* 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.