| SEC For | rm 4 | | | | | | | | | | | | | | | | | | |
|---|---|--|--|---|--|---|--|------|--|--------------|----------------|---|--|----------------|--|--|--------------------|--|---|
| | FORM | 4 | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | | | | | | OMB APPROVAL | | |
| Section 16. Form 4 or Form 5 obligations may continue. See | | | | | ed purs | NT OF CHANGES IN BENEFICIAL OWNER d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | | HIP | Estim | | er: verage burde sponse: | 3235-0287 n 0.5 |
| 1. Name and Address of Reporting Person [*] <u>ROTHBERG JONATHAN M</u> | | | | | <u>Hy</u> | 2. Issuer Name and Ticker or Trading Symbol <u>Hyperfine, Inc.</u> [HYPR] 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (give title Other (specify | | | | vner |
| 351 NEV (Street) | (F PERFINE, ₩ WHITFII | (Middle) | | | 06/09/2023 4. If Amendment, Date of Original Filed (Month/Day/Y | | | | | | ay/Year) | | below) below) 6. Individual or Joint/Group Filing (Check Applicable Line) X X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| GUILFC (City) |)RD C (s | 06437 (Zip) | - Ru | 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. | | | | | | | | | | | | | | | |
| | | Tal | ble I - Nor | n-Deriv | /ative | e Se | curities | s Ac | quired, D | isp | osed | of, or Be | enefic | ally | v Owned | | | | |
| D | | | | Date | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Yea | | Code (Ins | on Dispose | | rities Acquired (A) or ed Of (D) (Instr. 3, 4 and | | | 5. Amour Securitie Beneficia Owned F | s ally ollowing | Form (D) o | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | Code | v | Amoun | t (A) (D) | or Pri | ce | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | | |
| | | | | | | | | | uired, Dis s, options | | | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any | | 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 derivative Securitie Beneficia Owned Following Reported Transacti | e s dly g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | piration te | Title | Amour or Numb of Sha | unt (Ir ber | | (Instr. 4) | 511(5) | | |
| Stock Options (right to buy) | \$1.97 | 06/09/2023 | | | A | | 112,000 | | (1) | 06/ | /09/2033 | Class A Common Stock | 112,0 | 00 | \$0.00 | 112,00 | 00 | D | |

Explanation of Responses:

1. The shares underlying this option vest on the date of the Issuer's next regular annual stockholders meeting, subject to Dr. Rothberg's continued service through the applicable vesting date. Remarks:

/s/ John P. Condon, Attorney-06/12/2023 in-Fact for Jonathan M. Rothberg, Ph.D.

** 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.