FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL									
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

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(c). S	ee Instruction 1	0.																		
Name and Address of Reporting Person* <u>Fischel Nathan</u>				2. Issuer Name and Ticker or Trading Symbol Stereotaxis, Inc. [STXS]									ationship call app Direc	,	ing Perso	_ ` ` '				
(Last) (First) (Middle) C/O STEREOTAXIS, INC.				3. Date of Earliest Transaction (Month/Day/Year) 01/02/2025										Office below	er (give title v)		Other (below)	specify		
710 NORTH TUCKER BOULEVARD; SUITE 110					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street) ST. LOU	IS, MO	0 6	3101											Line)	<i>'</i>					
(City)	(Sta	ate) (Z	Zip)																	
		Table	I - No	n-Deriva	tive \$	Secu	rities	Acq	uired,	Dis	posed of	, or I	3enefi	cially	Own	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3)			4 and Securiti		ties For cially (D) Following (I) (wnership m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
							Code	v	Amount	(A (D) or) Pr	ice	Transa	action(s) 3 and 4)			(111341. 4)			
Common Stock 01/02/2				2025		A		56,497(1) .	A	\$ <mark>0</mark>	58	587,056		D					
Common Stock															13,6	580,554		I	See Footnote #2 ⁽²⁾	
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	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		Transaction Code (Instr. B) Se Ac (A) Dis		osed) r. 3, 4	6. Date Exercisable Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amour or Number of Shares	r						

Explanation of Responses:

- 1. Grant of restricted share units. Each restricted share unit represents a right to receive one share of common stock. The restricted share units vest on the earliest to occur of (i) the fifth anniversary of the date of the award, (ii) the date on which the service of the director on the board of directors terminates, or (iii) a Change of Control (as defined in the award documents).
- 2. Held by funds of which DAFNA Capital Management LLC, a Delaware Limited Liability Company, is the investment manager and general partner. Dr. Fischel is the Chief Executive Officer of DAFNA Capital Management, LLC.

/s/ Kimberly R. Peery,

01/02/2025 Attorney-in Fact for Nathan

Fischel

** 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.