FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
$\cup$	obligations may continue. See
	Instruction 1(b).

## 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

					_		• • •				iipaiiy Act c			_						
Name and Address of Reporting Person*  Curet Myriam				2. Issuer Name and Ticker or Trading Symbol Stereotaxis, Inc. [ STXS ]								(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Curet Wrymani													_	X Dir	ector		10% Ov	vner		
(Last)	(Fi	rst) (N	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 07/03/2023									icer (give title ow)		Other (s	specify	
C/O STEREOTAXIS, INC.					4 If Ar	4. If Amandment, Date of Original Filed (Manth/Day/Marx)									6. Individual or Joint/Group Filing (Check Applicable					
710 NORTH TUCKER BLVD., SUITE 110				4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Line)						
															X Form filed by One Reporting Person					
(Street) ST. LOU	(Street) ST. LOUIS, MO 63101															Form filed by More than One Reporting Person				
					Rule	Rule 10b5-1(c) Transaction Indication														
(City)	(St	ate) (Z	in)		Trails 1000 1(0) Trailsaction maleation															
(City)	(31	ale) (2	(Zip)				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	l - No	n-Deriva	tive S	ecui	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	ılly Ov	vned				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				//Year)	Executif any	Deemed cution Date, ly nth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securiti Disposed 5)		ies Acquired (A Of (D) (Instr. 3		(A) or . 3, 4 ar	Secu Ben Owr Follo	owing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(1	A) or D)	Price	Tran	orted saction(s) r. 3 and 4)				
Common	Stock			07/03/2	2023				A		47,619	47,619 <sup>(1)</sup> A		\$0		126,535		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
				(e.g., pu	ts, cai	IS, V	varra	ants,	option	ıs, c	onvertib	le s	ecur	ities)						
1. Title of Derivative Security (Instr. 3)	titve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		Secu Acqu (A) o Disp of (D	vative irities iired ir osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		;   ! ;	3. Price of Derivativ Security (Instr. 5)		у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber .res						

## 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).

/s/ Kimberly R. Peery,

Attorney-in-Fact, for Myriam 07/03/2023

**Curet** 

\*\* 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.