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

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF	CHANGES	IN

N 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

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response	: 0.5								

Name and Address of Reporting Person* Mahmoud Ramy A					2. Issuer Name and Ticker or Trading Symbol OptiNose, Inc. [OPTN]								(Che	ck all app Direc	,		10% C	wner		
	(Fir	IC.	Middle)			te of Ea		Trans	saction (Month/Day/Year)					X	below	<i>(</i>)	below)		(specify	
1020 STONY HILL ROAD, SUITE 300					4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable						
(Street)														Line)		filed by O	ne Repoi	ting Pers	son	
YARDLI 	EY PA	. 1	9067												Form Perso	filed by M	ore than	One Rep	porting	
(City)	(Sta	ate) (Ž	Zip)												1 6136	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		Table	I - Non-D)eriva	tive S	Secur	ities	Acq	uired	, Dis	posed of	, or B	enefi	ciall	y Own	ed				
1. Title of Security (Instr. 3)		Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Securities Beneficially Owned Follo		es ally Following	6. Owne Form: D (D) or In (I) (Instr	irect I direct E . 4) (7. Nature of ndirect Beneficial Dwnership			
								Code	v	Amount	(A) or (D)	(A) or (D) Price		Reported Transact (Instr. 3	tion(s)			Instr. 4)		
Common	Stock		12	2/15/20	022				A		6,113(1)	A	\$	60	201	,575	D			
Common	Stock		12	2/15/20	022	122		S		7,507(2)	D	\$	6 <mark>0</mark>	194,068		D				
Common Stock														172,422		I	1 2 2 7	By: The Ramy Mahmoud 2014 Trust for Cynthia Mahmoud		
		Tal									osed of, c				Owne	d				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, Transcurity or Exercise (Month/Day/Year) if any Co		Transa	Transaction of Code (Instr. Derivative		ative ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Evnlanation					Code V (A) (D)			(D)	Date Exercis	sable	Expiration Date		Amour or Number of Shares	er						

- 1. Represents the grant of performance-based restricted stock units (Performance RSUs) on March 6, 2020. Fifty percent (50%) of the Performance RSUs vested on June 15, 2022, upon achievement of certain milestones in connection with the Company's development programs. The balance vests in eight equal quarterly installments, subject to continued service with the Issuer. Each Performance RSU represents the right to receive one share of common stock of OptiNose, Inc.
- 2. Represents the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of restricted share units. This sale is mandated by the issuer's award agreement under its equity incentive plan to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.

Remarks:

/s/ Anthony Krick, Attorneyin-Fact

12/19/2022

** 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.