FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| vvasiliigion, | D.C. | 20040 |

| STATEMENT | OF | CHANGES | IN I | BENEFI | CIAL | OWNER | RSHIP |
|-----------|----|---------|------|--------|------|-------|-------|
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| OMB APPROVAL | | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

| | tion 1(b). | ide. 000 | | Filed | | t to Section tion 30(h) | | | | | | | 4 | | nours | per res | ponse: | 0.5 |
|---|---|--|---|---------|---|--|---------|---|-------|-------------------------|--------------------------------------|---------------------------------|--|-------------------------------|--|---------|---|---------|
| 1. Name and Address of Reporting Person* Biffi Andrea | | | | | 2. Issuer Name and Ticker or Trading Symbol ASENSUS SURGICAL, INC. [ASXC] | | | | | | | | | ck all applic | , | | on(s) to Issu | |
| (Last) VIA FIR | (F ENZE 40 | irst) | (Middle) | | 3. Date of Earliest Transaction 06/14/2022 | | | | | action (Month/Day/Year) | | | | | give title | | Other (s below) | specify |
| (Street) TREZZA | L | | 20060 | | 4. If Am | endment, [| Date of | f Original F | Filed | (Month/Da | ay/Yea | ar) | 6. Inc Line) | Form fil | ed by One | e Repo | (Check App rting Persor One Repor | n |
| (City) | (S | itate) | (Zip) | | | | | | | | | | | | | | | |
| | | Та | ble I - Non-I | Derivat | ive S | ecurities | s Acc | quired, | Disp | osed o | of, o | r Bene | ficially | Owned | | | | |
| Date | | t. Transact Date Month/Day | Execution Date, | | | Transaction Disposed Code (Instr. | | ities Acquired (A) o d Of (D) (Instr. 3, 4 | | | Securities Beneficia Owned Fo | Beneficially Owned Following | | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | Code | ٧ | Amount | | (A) or (D) | Price | Turing a strange | | | (Instr. 4) | |
| | | | Table II - De | | | urities ls, warr | • | , | • | , | | | • | 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 (Month/Day/Year) if any (Month/Day/Year) B | | | 5. Number of Derivative Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Securities (Instr. 3 and 4) | | | | ecurity | Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Date Exercisable

(2)

(D)

Explanation of Responses:

\$0.38

- 1. Represents an equity award issued under the Registrant's Amended and Restated Incentive Compensation Plan.
- 2. The stock options will vest on a quarterly basis over the one year following the date of grant, with the first vesting on the date of grant.

Code

Remarks:

Stock

Option⁽¹⁾

/s/ Joshua Weingard, as 06/15/2022 attorney-in-fact for Andrea Biffi

\$0.00

** Signature of Reporting Person

Number of Shares

116,828

Title

Stock

06/14/2029

Date

116,828

D

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).

06/14/2022

** 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.

(A)

116,828