FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OI	MR	AP	PR	O	/Α

OMB Number:	3235-0287
Estimated average burde	en
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).

(State)

(Zip)

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

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

	ense conditions of Rule Instruction 10.								
	dress of Reporting Pe	erson *	2. Issuer Name and Ticker or Trading Symbol InfuSystem Holdings, Inc [INFU]		Relationship of Reporting Person(s) to Issuer (Check all applicable)				
<u>Editiance Carrie</u>			midsystem moranigs, me [ma o]	X	Director	10% Owner			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/15/2025	X	Officer (give title below)	Other (specify below)			
C/O INFUSY	STEM HOLDING	GS, INC.			President ar	nd COO			
3851 WEST I	HAMLIN ROAD		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv	ridual or Joint/Group Filing	(Check Applicable Line)			
				X	Form filed by One Rep	orting Person			
(Street)					Form filed by More tha	n One Reporting Person			
ROCHESTER HILLS	R MI	48309							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Ad Disposed Of (D			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
		Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock							187,080(1)	D	
Common Stock	05/15/2025	P		1,165	A	\$6.005(2)	188,245	D	
Common Stock	05/16/2025	P		1,967	Α	\$6.096(2)	190,212	D	

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	 3A. Deemed Execution Date, if any (Month/Day/Year)	Code (In	nsaction de (Instr.) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

- $1.\ This\ total\ includes\ an\ additional\ 3,692\ shares\ acquired\ recently\ through\ the\ Company's\ Employee\ Stock\ Purchase\ Plan$
- 2. The price reported in Column 4 is a weighted average price. These shares reported herein were purchased in multiple transactions. The reporting person undertakes to provide to the Issuer, and security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price.

Remarks:

(City)

/s/ Kevin Whitman, Attorney-in-Fact for Carrie Lachance

05/19/2025

** 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.