1. Name and Address of Reporting Person
   MUIR GLENN P
   C/O NEURONETICS, INC
   3222 PHOENIXVILLE PIKE
   MALVERN PA 19355

2. Issuer Name and Ticker or Trading Symbol
   Neuronetics, Inc. [STIM]

3. Date of Earliest Transaction (Month/Day/Year)
   05/26/2022

4. If Amendment, Date of Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
   X Director
   10% Owner
   Officer (give title below)
   Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)
   X Form filed by One Reporting Person
   Form filed by More than One Reporting Person

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

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Acquired Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>05/26/2022</td>
<td></td>
<td>A</td>
<td>38,910 (1) A</td>
<td>128,271 (2) D</td>
<td></td>
</tr>
</tbody>
</table>

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Explanation of Responses:
1. Represents a restricted stock unit ("RSU") award that vests on the earlier of (a) May 26, 2023, and (b) the Company's next annual meeting of stockholders, in each case subject to continuous service of the Reporting Person through such date.
2. Each RSU represents a contingent right to receive one share of the Issuer's common stock.
3. Reflects an adjustment to total holdings to exclude 12 RSUs inadvertently included in prior reports.

/s/ W. Andrew Macan as Attorney-in-Fact 05/31/2022

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).
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.