FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(b) of the Investment Company Act of 1940

<u> </u>							-()-						-	1					
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol <u>Airsculpt Technologies, Inc.</u> [AIRS]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Aaron Thomas J													X	Direc	tor		10% O	wner	
(Last)	(Fir	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 05/10/2023									Offic belov	er (give title v)		Other (below)	specify
C/O AIRSCULPT TECHNOLOGIES, INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)								6 In	6. Individual or Joint/Group Filing (Check Applicable					
1111 LINCOLN ROAD, SUITE 802				(wondhond, bac of original fried (wondh/bay/feal)									Line)						
													X	X Form filed by One Reporting Person					
(Street) MIAMI															Form Pers	n filed by Mo on	ore tha	an One Rep	orting
BEACH	FL	. 3		Rule 10b5-1(c) Transaction Indication															
(City)	(St	ate) (Z	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.								ended to						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day				/Year) if any		eemed ution Date, h/Day/Year)						es Acquired (A) Of (D) (Instr. 3, 4		Securi Benefi Owner Follow	icially d /ing	Forn (D) o	m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount	(A (D) or))	Price	Reported Transaction(s) (Instr. 3 and 4)						
Common Stock 05/10/20				023				A 29,762 ⁽¹⁾		l)	A	\$0.00	.00 80,099			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	3. Transaction Date (Month/Day/Year)	Execu if any	eemed ution Date, th/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		D Si (li	Price of erivative ecurity istr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

1. The Reporting Person was granted an award of 29,762 Restricted Stock Units on May 10, 2023 which will vest upon the earlier of (i) the first anniversary of the date of grant or (ii) the day prior to the next annual meeting of stockholders of AirSculpt Technologies, Inc. (the "Company"), subject to the Reporting Person's continued service with the Company.

<u>/s/ Thomas P. Conaghan,</u>	05/11/2022
Attorney-in-Fact	<u>05/11/2023</u>

** 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.