## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL	
OMB Number:	3235-0	287
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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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type	pe Response:	S)												
1. Name and Address of Reporting Person * JOHNSON B KRISTINE			2. Issuer Name and Ticker or Trading Symbol ClearPoint Neuro, Inc. [CLPT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
C/O CLE MUSICK	ARPOIN	(First) Γ NEURO,	(Middle) INC., 5	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2021			Office	er (give title belo	ow)	Other (specify b	elow)			
IRVINE.	CA 92618	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			r)	6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)		if Code (Instr. 8	Code (Instr. 8)		on 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Ownership of Form:	Beneficial		
				(Month/Day/Yea	Code	v	Amoun	(A) or (D)	Price	(Instr. 3 and 4)			\ /	Ownership (Instr. 4)
Common	Stock		03/31/2021		A		255	A	\$ 19.57 (1)	5,561			D	
Keimilder. I	Report on a s	reparate fine to		Derivative Secu	rities Acqu	Per con the	sons whatained in form dis	no responding this for this for Book or Book o	orm are a curre eneficial	not requesting ntly valid	OMB conf	formation spond unle trol numbe	SS	1474 (9-02)
. =	_	I		e.g., puts, calls,		_			<del>-                                    </del>			I		1
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transactio Date (Month/Day/	Year) Execution Da	4. Transactio Code (Instr. 8)	5. Number of Derivative Securities Acquirect (A) or Disposect of (D) (Instr. 3, 4, and 5)	and Expiration Date (Month/Day/Year)  Au Un See (Ir 4)		Amo Und Secu (Inst	curities (Instr. 5) Benef Owne Follow Repor Trans. (Instr.			Ownersh Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)	
				Code V	/ (A) (E		te ercisable	Expirati Date	Title	Amount or Number of Shares	er			

### **Reporting Owners**

Reporting Owner Name / Address		Relationships					
	1	Director	10% Owner	Officer	Other		
JOHNSON B KRISTINE C/O CLEARPOINT NEURO, INC 5 MUSICK IRVINE, CA 92618	C.	X					

#### **Signatures**

Richard F. Mattern, by Power of Attorney for B. Kristine Johnson	04/02/2021
**Signature of Reporting Person	Date

#### **Explanation of Responses:**

- \* 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).
- These shares were issued pursuant to the issuer's Third Amended and Restated 2013 Incentive Compensation Plan, in payment of fees owed to the reporting person under the (1) issuer's Non-Employee Director Compensation Plan, as amended and restated. The shares were issued at a price of \$19.57 per share, representing the volume-weighted average price of the issuer's common stock for the five-trading day period ended March 31, 2021.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.