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).

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

Name and Address of Reporting Person* Fountain Tamara				2. Issuer Name and Ticker or Trading Symbol RxSight, Inc. [RXST]									ck all app	,	ng Pers	son(s) to Is			
(Last)	ast) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/06/2024								Office below	er (give title /)		Other (s below)	specify		
C/O RXSIGHT, INC.				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
100 COLUMBIA											1 _	Line) ✓ Form filed by One Reporting Person							
(Street)														N.	_	filed by Mo		•	
ALISO V	SO VIEJO CA 92656			DIII	Rule 10b5-1(c) Transaction Indication														
(O:t-)	(0)	-4-> /-	7:\		Kui	e 10	JD:5-	1(0)	Hall	saci	ion mu	Call	OH						
(City)	(51	State) (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.											nded to		
		Table	I - Non-	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	oosed of	, or E	3ene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Executive Execut		Deemed cution Date, ny nth/Day/Year)					es Acquired (A) Of (D) (Instr. 3,			Benefic	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or	Price	Transa	action(s) 3 and 4)			(Instr. 4)	
Common Stock ⁽¹⁾ 06/06/2					2024				Α		2,554(2)	I	A	(1)	31,793			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)	3A. Deem Execution if any (Month/Da	n Date,		ransaction of December 1 of December 1 of December 2 of De		osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/Y		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C	10. 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	Amount or Number of Shares		ber						

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of RxSight, Inc. Common Stock.
- 2. Subject to the Reporting Person's continuing as an Outside Director (as defined in the Issuer's 2021 Equity Incentive Plan) through such applicable vesting date, one hundred percent (100%) of the RSUs subject to the award shall vest on the earlier of the (i) the one (1) year anniversary of the Date of Grant or (ii) the date immediately prior to the next annual meeting of stockholders following the Date of Grant. "Date of Grant" shall mean June 6, 2024.

/s/ Shelley Thunen, as Attorney-in-Fact

06/10/2024

** 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.