FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours nor 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)

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* Buchanan Lucas W. (Last) (First) (Mi C/O SILK ROAD MEDICAL, INC.	ddle)	3. D	Issuer Name and Ticker or Trading Symbol Silk Road Medical Inc SILK 3. Date of Earliest Transaction (Month/Day/Year) 09/28/2021								5. Relationship of Reporting Person(s) to I (Check all applicable) Director 10% X Officer (give title below) COO/CFO					ner		
1213 INNSBRUCK DRIVE (Street) SUNNYVALE CA 94 (City) (State) (Zig	089	4. If Amendment, Date of Original Filed (Month/Day/Year)								5. Individual or Joint/Group Filing (Check Applicable ine) 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 1. Title of Security (Instr. 3) 2. Transaction 2. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. Nature of																		
Date (Month/Day/Year)			Execution Date, if any (Month/Day/Year)		Transa Code 8)		Disposed Of (D) (In Amount (A) or (D)		or			Report Transa	ially Followin	(D) or Ir	Form: Direct (D) or Indirect (I) (Instr. 4)		Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/28/2021			M ⁽¹⁾		10,000 A		_	\$12.1	-	192,655		D	D				
Common Stock	09/28/2021				S ⁽¹⁾		10,000)	\$54.86	45 ⁽²⁾	182,655		D	D			
Common Stock											13,518		I	I		Buchanan Grandchildren's Irrevocable Trust ⁽³⁾		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execurity or Exercise (Month/Day/Year) if a		ransaction of ode (Instr. Derivativ			itive ities red sed (Instr.	r 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title a of Secur Underly Derivati (Instr. 3					es I Security	Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	, E	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	C	ode	v	(A) (Date Exercis	sable	Expiration Date			Amoun or Numbe of Shares	er						
Option (right to buy) \$12.15 09/28/2021	N	1 ⁽¹⁾		1	10,000	04/04/2	2021 ⁽⁴⁾	11/30/202	7	Common Stock	10,00	0	\$0	10,000		D		

- 1. The option exercise and sale reported on this Form 4 were effected pursuant to Rule 10b5-1 Trading Plan adopted by the reporting person on September 11, 2020.
- 2. This transaction was executed in multiple trades at price ranging from \$54.08 to \$55.67. The price reported above reflects the weighted average sale price. The Reporting Person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. These shares are held directly by the Buchanan Grandchildren's Irrevocable Trust, for which the Reporting Person serves as a co-trustee.
- 4. All of the shares subject to this option are fully vested and exercisable as of the date hereof.

Remarks:

/s/Mhairi Jones, by power of <u>attorney</u>

09/29/2021

** 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.