FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

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).

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

1. Name and Address of Reporting Person* Buchanan Lucas W.						2. Issuer Name and Ticker or Trading Symbol Silk Road Medical Inc [SILK]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (speci				ner			
(Last) (First) (Middle) C/O SILK ROAD MEDICAL, INC. 1213 INNSBRUCK DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 03/16/2020										Chief Financial Officer							
(Street) SUNNYVALE CA 94089 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)											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																						
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			ear) i	2A. Deemed Execution Date, if any (Month/Day/Yea		е,	3. Transa Code (8)	ction			cquired (A) or 0) (Instr. 3, 4 and		and Se Be Ov	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect I	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Code V		Amo	mount (A) or Price		Tra	ansaction(s) str. 3 and 4)								
Common Stock			03/16/202	20	0			M ⁽¹⁾		1	100	Α	\$1	.6	89,510		D						
Common Stock 03/16/202				20				S ⁽¹⁾		100		D	\$30	.25	89,410		D						
Common Stock																13,518		I	Grando	Buchanan Grandchildren's Irrevocable Trust ⁽²⁾			
	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. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code 8)		5. Numbe of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi	ate Exer ration D nth/Day/			Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
						v	(A)	(D)	Date Exer	cisable		Expiration Date	Title		Amount or Number of Shares								
Option (right to buy)	\$1.6	03/16/2020			M ⁽¹⁾			100	09/0-	4/2016 ⁽³	3)	08/04/2026	Com		100	\$0		46,279	D				

Explanation of Responses:

- 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 5, 2019.
- 2. These shares are held directly by the Buchanan Grandchildren's Irrevocable Trust, for which the Reporting Person serves as a co-trustee.
- 3. One forty-eighth of the shares subject to the option shall vest on September 4, 2016 and each month thereafter, subject to the Reporting Person continuing as a service provider through each such date.

Remarks:

/s/Mhairi Jones, by power of 03/18/2020 attorney

** Signature of Reporting Person

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.