SEC For	rm 4																				
FORM 4 UN				NITED STATES SECURITIES AND EXCHANGE COMMISSIC Washington, D.C. 20549														ON OMB APPROVAL			
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).						irsuant	to Sec	tion 1	6(a) o	of the	Securi	<b>NEF</b> ities Excompany		RSHIP OMB Number: Estimated average burd hours per response:			verage burden	3235-0287 0.5			
1. Name and Address of Reporting Person <sup>*</sup> Rogers Erica J.						lssuer ilk R					Symbol		heck all applic	able) r	10%		Owner				
(Last) (First) (Middle) C/O SILK ROAD MEDICAL, INC. 1213 INNSBRUCK DRIVE						Date o	est Tra	ansac	tion (I	Month	/Day/Ye		X Officer (give title Other (specify below) below) President and CEO								
(Street) SUNNYVALE CA 940					4. 	4. If Amendment, Date of Original Filed (Month/Day/Year)										<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>					
(City)	(S	tate) Tal	(Zip)	) I - Non-Dei	rivativ		curit	ios /		uiroc		snose	d of	or Bei	oficia	ully Owned	1				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)				ı 2. E ∋ar)if	2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acqu Disposed Of (D) (II			ired (A) or		5. Amount of Securities Beneficially Owned Following Reported		6. Ownersl Form: Dire (D) or Indir (I) (Instr. 4)	rect Indirec rect Benefic Owners	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								с	ode	v	Amo	unt	(A) c (D)	Price		Transaction(s (Instr. 3 and 4	5) 4)		4)		
Common Stock				09/12/202	2			N	<b>1</b> <sup>(1)</sup>		10,000		A	\$1.6		256,199		D			
Common Stock			09/12/2022				5	<b>S</b> <sup>(1)</sup>		10,000		D	D \$43.6173 <sup>(2)</sup>		246,199		D				
Common Stock																83,843		The		2	
			Tab	ole II - Deriv (e.q.,										or Bene le secu		y Owned					
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		4. Transa Code 8)	action	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Ins 3, 4 and 5)		r 6. Date Expirati (Month/		Exercisable and on Date Day/Year)			7. Title an of Securit Underlyin Derivative (Instr. 3 a	d Amour ies g Security	ount 8. Price of Derivative Security	der Sec Ber Ow Fol Rep Tra	Number of rivative curities neficially med llowing ported nnsaction(s) str. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Expira Date	tion	Title	Amoun or Numbe of Shares	nber								
Option (right to buy)	\$1.6	09/12/2022			<b>M</b> <sup>(1)</sup>			10,00	0 09	/04/20	16 <sup>(4)</sup>	08/04/2	2026	Common Stock	10,00	0 \$0		72,654	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 August 20, 2021.

2. This transaction was executed in multiple trades at price ranging from \$43.13 to \$44.00. 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 Kevin J. Surace and Erica J. Rogers, as Trustees of The Surace Rogers Family Trust.

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 attorney

09/14/2022

\*\* 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.